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| Fill in this information to identify your case:                         |   |
|---|---|
| United States Bankruptcy Court for the:  Northern District of: Illinois |   |
| (State)  Case number (if known)   | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself   |                            |   |
|---|----------------------------|---|
|   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name   | Sheryl                     | Jesse   |
| Write the name that is on   | First name                 | First name                                    |
| your government-issued picture identification (for                  | Middle name                | Middle name                                   |
| example, your driver's  | Franklin                   | Franklin                                      |
| license or passport   | Last name                  | Last name                                     |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. All other names you  |                            |   |
| have used in the last<br>8 years                                    | First name                 | First name                                    |
| Include your married or   | Middle name                | Middle name                                   |
| maiden names.   | Last name                  | Last name                                     |
|   | First name                 | First name                                    |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
| 3. Only the last 4 digits of your Social                            | XXX - XX                   | XXX - XX- 4204                                |
| Security number or federal Individual                               | OR                         | OR  |
| Taxpayer<br>Identification number<br>(ITIN)                         | 9 xx - xx-                 | 9 xx - xx-                                    |

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| D  | ebtor 1 Sheryl<br>First Name                           | Franklin  Middle Name Last Name  |                                   | Case number (if kno                         | wn)   |   |
|----|--|--|-----------------------------------|---|---|---|
|    |  |  |                                   |   |   |   |
|    |  | About Debtor 1:  |                                   | About Debtor                                | 2 (Spouse Only                                | in a Joint Case):                                 |
| 4. | Any business names and Employer                        | I have not used any business names or B  | EINs.                             | I have not used any business names or EINs. |   |   |
|    | Identification Numbers (EIN) you have used in the last | Business name  |                                   | Business nam                                | ne  |   |
|    | 8 years  | Business name  |                                   | Business nam                                | ne  |   |
|    | Include trade names and doing business as names        | EIN  |                                   | EIN   |   |   |
|    |  | EIN  |                                   | EIN   |   |   |
| 5. | Where you live   |  |                                   | If Debtor 2 live                            | es at a different add                         | dress:  |
|    |  | 4937 W Maypole Ave Unit B<br>Number Street   |                                   | 4937 W Maypol<br>Number                     | e Ave Unit B<br>Street                        |   |
|    |  | Chicago Illinois 606   |                                   | Chicago                                     | Illinois                                      | 60644   |
|    |  | City State Zip 0   | Code                              | City  | State   | Zip Code  |
|    |  | Cook   |                                   | Cook  |   |   |
|    |  | County   |                                   | County                                      |   | _   |
|    |  | If your mailing address is different from above, fill it in here. Note that the court we notices to you at this mailing address. | ithe one<br>ill send any          |   | Note that the court v                         | different from yours, will send any notices to    |
|    |  | Number Street  |                                   | Number                                      | Street  |   |
|    |  |  |                                   |   |   |   |
|    |  | City State Zi  | ip Code                           | City  | State   | Zip Code  |
| 6. | Why you are choosing this district                     | Check one:   |                                   | Check one:                                  |   |   |
|    | to file for bankruptcy                                 | Over the last 180 days before filing this p lived in this district longer than in any oth  | petition, I have<br>per district. | Over the la lived in this                   | st 180 days before fi<br>district longer than | ling this petition, I have in any other district. |
|    |  | I have another reason. Explain. (See 28 U  | J.S.C. §§ 1408.)                  | I have ano                                  | ther reason. Explain.                         | (See 28 U.S.C. §§ 1408.)                          |
|    |  |  |                                   |   |   |   |
|    |  |  |                                   |   |   |   |
|    |  |  |                                   |   |   |   |
|    |  |  |                                   |   |   |   |
|    |  |  |                                   |   |   |   |

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| De  | ebtor 1 Sheryl  |  | Franklin  |  | Case number (if kno   | own)   |  |
|-----|---|--|---|--|---|--|--|
|     | First Name  | Middle Nam   | e Last Name   |  |   |  |  |
| Pa  | rt 2: Tell the Court Abo  | ut Your Bankrup  | tcy Case  |  |   |  |  |
| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  |  | brief description of each, send B2010)). Also, go to the top  |  |   |  | ndividuals Filing for  |
| 8.  | How you will pay the fee  | more details a cashier's che may pay with  I need to pay Individuals to I request that judge may, but the official poyou choose to | entire fee when I file my about how you may pay. Took, or money order. If your a credit card or check with the fee in installments. If a Pay Your Filing Fee in Installment is not required to, waive overty line that applies to your file it with your petition and file it with your petition. | ypically, if you attorney is so a pre-printer f you choose stallments (Omay request a your fee, an our family si ut the Applic | ou are paying the<br>submitting your<br>ed address.<br>This option, sign<br>official Form 103<br>this option only<br>d may do so only<br>ze and you are u | e fee yourself, payment on your and attach to A).  If you are filing the your incorunable to pay to the pay to the pay to the your selections. | you may pay with cash, our behalf, your attorney the Application for the for Chapter 7. By law, a me is less than 150% of the fee in installments). If |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | No.  ✓ Yes. District  District   | Northern District of Illinois  Northern District of Illinois  | When<br>When<br>When   | 9/17/2015<br>MM / DD / YYYY<br>11/4/2015<br>MM / DD / YYYY  | Case number _ Case number _ Case number _  | 15-31668<br>15-37609   |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.  Yes. Debtor District Debtor District  |   | When When  | MM / DD / YYYY  | Relationship to Case number, i Relationship to Case number, i  | f known  |
| 11. | Do you rent your residence?   | ✓ No.  | e 12.  r landlord obtained an eviction  Go to line 12.  Fill out <i>Initial Statement About</i> this bankruptcy petition.   |  |   | st You (Form 10  | 1A) and file it with   |

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Sheryl Franklin Case number (if known)
First Name Middle Name Last Name

| Pa   | rt 5: Explain Your Effo   | rts to Receive a Brie   | fing About Credit Counseling  |    |  |  |  |
|--|---|---|---|----|--|--|--|
|  |   | About Debtor 1:   |   | Al | bout Debtor 2 (S <sub>l</sub>  | pouse Only in a Joint Case):   |  |
| 15.  | · Tell the court  | You must check one:   |   | Y  | ou must check one:   |  |  |
| The year of the ye | whether you have received briefing about credit counseling.   | counseling agen   | ring from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.  | ~  | counseling ager  | fing from an approved credit<br>ncy within the 180 days before I<br>uptcy petition, and I received a<br>mpletion.  |  |
|  | The law requires that you receive a briefing  |   | he certificate and the payment plan, veloped with the agency.   |    |  | the certificate and the payment plan, eveloped with the agency.  |  |
|  | about credit<br>counseling before you<br>file for bankruptcy.<br>You must truthfully  | counseling agen   | ring from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.   |    | counseling ager  | fing from an approved credit<br>ncy within the 180 days before I<br>uptcy petition, but I do not have a<br>mpletion.   |  |
|  | check one of the<br>following choices. If<br>you cannot do so, you<br>are not eligible to file.   |   | er you file this bankruptcy petition,<br>opy of the certificate and payment   |    |  | ter you file this bankruptcy petition, copy of the certificate and payment   |  |
|  | are not eligible to file.  If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. | from an approve obtain those ser made my reques                   | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the  |    | from an approve<br>obtain those se<br>made my reques   | ked for credit counseling services<br>ed agency, but was unable to<br>rvices during the 7 days after I<br>st, and exigent circumstances<br>emporary waiver of the                    |  |
|  |   | requirement, attac<br>efforts you made t<br>unable to obtain it   | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and umstances required you to file this  |    | requirement, atta<br>efforts you made<br>unable to obtain i  | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this       |  |
|  |   |   | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy.  |    |  | e dismissed if the court is dissatisfied for not receiving a briefing before truptcy.  |  |
|  |   | receive a briefing<br>must file a certifica<br>with a copy of the | If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. |    | receive a briefing<br>must file a certific<br>with a copy of the                                       | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along a payment plan you developed, if any. so, your case may be dismissed. |  |
|  |   | -   | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.  |    | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |  |  |
|  |   | I am not required counseling beca                                 | d to receive a briefing about credit ause of:   |    | I am not required to receive a briefing about cred counseling because of:                              |  |  |
|  |   | ☐ Incapacity.   | I have a mental illness or a mental<br>deficiency that makes me<br>incapable of realizing or making<br>rational decisions about finances.   |    | Incapacity.  | I have a mental illness or a mental<br>deficiency that makes me<br>incapable of realizing or making<br>rational decisions about finances.  |  |
|  |   | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.  |    | Disability.  | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.         |  |
|  |   | Active duty.  | I am currently on active military duty in a military combat zone.   |    | Active duty.   | I am currently on active military duty in a military combat zone.  |  |
|  |   | about credit coun   | are not required to receive a briefing seling, you must file a motion for ounseling with the court.   |    | about credit cour  | are not required to receive a briefing nseling, you must file a motion for counseling with the court.  |  |

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| Debtor 1 Sheryl   |  | Franklin   | Case number (if know   | vn)   |
|---|--|--|--|---|
| Part 6: Answer These Que  | Middle Name estions for Reporting Purpos   | Last Name  |  |   |
| 16. What kind of debts do you have?   | 16a. Are your debts primari "incurred by an individu No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primari  | ily consumer debte<br>ual primarily for a pe<br>ily business debts?<br>or investment or thro   | ersonal, family, or house<br>Properties and Business debts are deleased by the operation of the second | bts that you incurred to obtain<br>ne business or investment.   |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that   | ter 7. Do you estimate   |  | operty is excluded and administrative<br>red creditors?   |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  |  | -5,000<br>-10,000<br>1-25,000  | 25,001-50,000<br>50,001-100,000<br>More than 100,000  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10,00<br>\$50,00   | 0,001-\$10 million<br>00,001-\$50 million<br>00,001-\$100 million<br>000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion   |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$10,00<br>\$50,00   | 0,001-\$10 million<br>00,001-\$50 million<br>00,001-\$100 million<br>000,001-\$500 million   | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion   |
| Part 7: Sign Below  | <del></del>  |  |  |   |
| For you   | correct.  If I have chosen to file under of title 11, United States Codunder Chapter 7.  If no attorney represents me a out this document, I have obt I request relief in accordance I understand making a false s | Chapter 7, I am awa<br>de. I understand the<br>and I did not pay or<br>tained and read the<br>with the chapter of<br>statement, concealing<br>y case can result in | are that I may proceed, if<br>relief available under ear<br>ragree to pay someone various required by 11 United States (in group property, or obtaining  | the information provided is true and f eligible, under Chapter 7, 11,12, or 13 ach chapter, and I choose to proceed who is not an attorney to help me fill J.S.C. § 342(b).  Code, specified in this petition. g money or property by fraud in or imprisonment for up to 20 years, or |
|   | /s/ Sheryl Franklin Signature of Debtor 1  |  | /s/ Jesse<br>Signature of  |   |
|   | Executed on 2/16/201   | 18<br>DD / YYYY  | Executed   | on2/16/2018<br>MM / DD / YYYY   |

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| Debtor 1 Sheryl                                  |                           | Franklin                 | Case number (ii                             | known)  |
|--|---------------------------|--------------------------|---|---|
| First Name                                       | Middle Name               | Last Name                |   |   |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12    | 2, or 13 of title 11, Unite                 | nave informed the debtor(s) about<br>d States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ | uired by 11 U.S.C. §     | 342(b) and, in a case in                    | which § 707(b)(4)(D) applies, certify that I  |
| represented by an                                | have no knowledge after   | information in the sched | dules filed with the petition is incorrect. |   |
| attorney, you do not                             | · ·                       | 4. 7                     |   |   |
| need to file this page.                          | /s/ Brittney Mansfie      | qq                       | Date  | 2/16/2018   |
|  | Signature of Attorney     |                          |   | MM / DD / YYYY  |
|  | olghataro or / titolino)  | .0. 200.0.               |   |   |
|  |                           |                          |   |   |
|  | Brittney Mansfield        |                          |   |   |
|  | Printed name              |                          |   |   |
|  |                           |                          |   |   |
|  | Semrad Law Firm Firm name |                          |   |   |
|  |                           |                          |   |   |
|  | 11101 S. Western Av       | enue                     |   |   |
|  | Street                    |                          |   |   |
|  |                           |                          |   |   |
|  |                           |                          |   |   |
|  | Chicago                   |                          | Illinois                                    | 60643   |
|  | City                      |                          | State                                       | Zip Code  |
|  | Contact phone             | 3124477849               | En ellestates                               | L   |
|  | Contact phone             | 31244//049               | Email address                               | bmansfield@semradlaw.com  |
|  |                           |                          |   |   |
|  | Bar number                |                          | State                                       |   |
|  | Dai Halliboi              |                          | Olale                                       |   |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1  | Sheryl                    |             | Franklin                     |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |
| Debtor 2  | Jesse                     |             | Franklin                     |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |
| Case number<br>(If known)                       |                           |             | (State)                      |  |  |  |

| Check if | this    | is | an |
|----------|---------|----|----|
| amende   | d filir | ng |    |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets<br>Value of what you own               |
|--|--|
| . Schedule A/B: Property (Official Form 106A/B)  | \$0.00   |
| 1a. Copy line 55, Total real estate, from Schedule A/B   | ·  |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$10,875.00<br>——————————————————————————————————— |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$10,875.00  |
| art 2: Summarize Your Liabilities  |  |
|  | Your liabilities<br>Amount you owe                 |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$11,215.00  |
| Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   |  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | \$12,343.00  |
| Your total liabilities   | \$23,558.00  |
| art 3: Summarize Your Income and Expenses  |  |
|  |  |
| Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I   | \$1,768.00   |
| . Schedule J: Your Expenses (Official Form 106J)   | \$1,428.00   |
|  | <b>41</b> //28 DD                                  |

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| Deb         | otor 1 Sheryl First Name   | Middle Name   | Franklin<br>Last Name         | Case number (if known)   |        |  |  |  |  |
|-------------|--|---|-------------------------------|--|--------|--|--|--|--|
| Part        |  | estions for Administrati                            |                               | ords   |        |  |  |  |  |
| 6. <b>A</b> | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  |   |                               |  |        |  |  |  |  |
| [           | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.   |   |                               |  |        |  |  |  |  |
| [           | ✓ Yes.   |   |                               |  |        |  |  |  |  |
| 7. <b>V</b> | /hat kind of debt do you ha  | ave?  |                               |  |        |  |  |  |  |
| [           |  |   |                               | d by an individual primarily for a personal, al purposes. 28 U.S.C. § 159. |        |  |  |  |  |
| Г           |  |   |                               | this part of the form. Check this box and s                                | submit |  |  |  |  |
|             | this form to the court wit   |   |                               |  |        |  |  |  |  |
|             | 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$268.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. |   |                               |  |        |  |  |  |  |
| 9.          | Copy the following specia  | al categories of claims fro                         | m Part 4, line 6 of Schedu    | ıle E/F:   |        |  |  |  |  |
|             | From Part 4 on Schedule E/F, copy the following:   |   |                               | Total claim  |        |  |  |  |  |
|             | 9a. Domestic support oblig   | ations (Copy line 6a.)                              |                               | \$0.00   |        |  |  |  |  |
|             | 9b. Taxes and certain other  | debts you owe the governm                           | nent. (Copy line 6b.)         | \$0.00   |        |  |  |  |  |
|             | 9c. Claims for death or pers   | for death or personal injury while you were intoxic |                               | \$0.00   |        |  |  |  |  |
|             | 9d. Student loans. (Copy lin   | ne 6f.)   |                               | \$0.00   |        |  |  |  |  |
|             | 9e. Obligations arising out of priority claims. (Copy line 6)  | of a separation agreement of                        | r divorce that you did not re | eport as \$0.00  |        |  |  |  |  |
|             |  | fit-sharing plans, and other                        | similar debts. (Copy line 6h. | \$0.00   |        |  |  |  |  |

\$0.00

9g. Total. Add lines 9a through 9f.

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|                                    |  | Docui   | nent Page 10 01 0  | 9   |   |  |
|------------------------------------|--|---|--|---|---|--|
| Fill in this                       | information to identify your case:   |   |  |   |   |  |
| Debtor 1                           | Sheryl   |   | Franklin   |   |   |  |
|                                    | First Name   | Middle Name   | Last Name  |   |   |  |
| Debtor 2<br>(Spouse, if fi         | Jesse<br>First Name  | Middle Name   | Franklin<br>Last Name  |   |   |  |
|                                    | - I not realite  |   |  |   |   |  |
| United Sta                         | ates Bankruptcy Court for the: Nor   | <u>hern</u> Dis   | strict of Illinois (State)   |   |   |  |
| Case nun<br>(If known)             | nber   |   |  |   |   |  |
| Officia                            | al Form 106A/B   |   |  |   | Check if this is an amended filing                      |  |
| Sche                               | dule A/B: Property   |   |  |   | 12/   |  |
| category<br>responsib<br>write you | ategory, separately list and descri<br>where you think it fits best. Be as<br>le for supplying correct information<br>r name and case number (if known<br>Describe Each Residence, B | complete and accurate on. If more space is need o). Answer every question | as possible. If two married peop<br>ed, attach a separate sheet to<br>n. | ole are filing together, both a<br>this form. On the top of any a | are equally   |  |
| 1. Do you                          | u own or have any legal or equital   | le interest in any reside   | nce, building, land, or similar p  | operty?   |   |  |
| <u> </u>                           | No. Go to Part 2   |   |  |   |   |  |
|                                    | Yes. Where is the property?  |   |  |   |   |  |
| 1.1                                |  |   | property? Check all that apply.  |   | claims or exemptions. Put<br>ired claims on Schedule D: |  |
| 1.1                                | Street address, if available, or other   | description   | amily home<br>or multi-unit building                                     | Creditors Who Have Claims Secured by Property                     |   |  |
|                                    |  |   | ninium or cooperative  | Current value of the  | Current value of the                                    |  |
|                                    |  | Manufac   | ctured or mobile home  | entire property?  | portion you own?  |  |
|                                    | Number Street  | Land  |  | Describe the meture   | f   |  |
|                                    | Number Street  | <u> </u>  | ent property   | Describe the nature of<br>interest (such as fee s                 |   |  |
|                                    | City State Zi  | p Code Timesha  | re   | the entireties, or a life   | estate), if known.                                      |  |
|                                    |  | one.  Debtor 1  Debtor 2  Debtor 1  | •  |   | ommunity property                                       |  |
|                                    |  |   | mation you wish to add about the   | nis item, such as local   |   |  |
| If you                             | own or have more than one, list her  |   | entification number:   |   |   |  |
| ,                                  |  |   | property? Check all that apply.  |   | claims or exemptions. Put                               |  |
| 1.2                                | Street address, if available, or other   | description Single-fa   | amily home   |   | red claims on Schedule D:<br>aims Secured by Property.  |  |
|                                    | on our address, in available, or ourse   | Duplex o  | or multi-unit building   | Current value of the  | Current value of the                                    |  |
|                                    |  | <u> </u>  | ninium or cooperative  | entire property?  | portion you own?  |  |
|                                    |  | Land  | ctured or mobile home  |   |   |  |
|                                    | Number Street  |   | ent property   | Describe the nature of  |   |  |
|                                    |  | Timesha   | ıre  | interest (such as fee s<br>the entireties, or a life              |   |  |
|                                    | City State Zi  | p Code Cother _   |  |   |   |  |
|                                    |  | one.  | interest in the property? Check  |   | mmunity property  |  |
|                                    |  | Debtor 1  | ·  |   |   |  |
|                                    |  | Debtor 2  | •  |   |   |  |
|                                    |  |   | and Debtor 2 only<br>one of the debtors and another                      |   |   |  |
|                                    |  | I / it isast i  | , 3. 110 0001010 0110 011011101  |   |   |  |

Other information you wish to add about this item, such as local property identification number:

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| Debtor 1    | Sheryl<br>First Name   | Middle Name                            | Franklin<br>Last Name  | Case number       | (if known)  |   |
|-------------|--|--|--|-------------------|---|---|
| 1.3         | et address, if available, or otl                               |  | What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home                     | apply.            | the amount of any secu  | claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own? |
| Nur<br>City | nber Street<br>State   | Zip Code                               | Land Investment property Timeshare Other   | _                 | Describe the nature or interest (such as fee sthe entireties, or a life | imple, tenancy by   |
|             |  |  | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add a | other             | Check if this is co<br>(see instructions)  Such as local                | mmunity property  |
|             | the dollar value of the porve attached for Part 1. Wr          | tion you own for a                     |  | ding any entries  | s for pages   |   |
| Do you ov   |  | equitable interes                      | t in any vehicles, whether they are  |                   |   |   |
|             | ns, trucks, tractors, sport ut                                 |  | also report it on Schedule G: Executor rcycles   | y Contracts and l | Jnexpired Leases.   |   |
| 3.1         | Make<br>Model:<br>Year:  | Toyota<br>Highlander<br>2007<br>100000 | Who has an interest in the propone.  Debtor 1 only   | perty? Check      | the amount of any secu  | claims or exemptions. Put<br>ured claims on <i>Schedule D:</i><br>aims Secured by Property.                         |
|             | Approximate mileage: Other information: 2007 Toyota Highlander | 10000                                  | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is community   |                   | Current value of the entire property?<br>\$9475.00                      | Current value of the portion you own?<br>\$9475.00  |
| 3.2         | Make<br>Model:<br>Year:  |  | who has an interest in the propone. Debtor 1 only  | perty? Check      | the amount of any secu  | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.                                      |
|             | Approximate mileage:  Other information:                       |  | Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors an  Check if this is community instructions)  |                   | Current value of the entire property?                                   | Current value of the portion you own?   |

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|      | Sheryl<br>First Name   | Middle Name | Franklin<br>Last Name  | Case numb   | er (if known)  |   |  |
|------|--|-------------|--|---|--|---|--|
| 3.3  | Make<br>Model:<br>Year:<br>Approximate mileage:  |             | Who has an interest in the one.  Debtor 1 only   | property? Check   | Do not deduct secured the amount of any secu-<br>Creditors Who Have Cla  | •   |  |
|      | Other information:   |             | Debtor 2 only  Debtor 1 and Debtor 2 on  | nlv   | Current value of the entire property?  | Current value of the portion you own?   |  |
|      |  |             | At least one of the debtor   | -   |  |   |  |
|      |  |             | Check if this is communinstructions)   |   |  |   |  |
| 3.4  | Make<br>Model:   |             | Who has an interest in the one.  | property? Check   | Do not deduct secured the amount of any secu   |   |  |
|      | Year:  |             | Debtor 1 only  |   | Creditors Who Have Cla   | e Claims Secured by Property  |  |
|      | Approximate mileage:   |             | Debtor 2 only  |   | Current value of the   | Current value of the  |  |
|      | Other information:   |             | Debtor 1 and Debtor 2 on   | nly   | entire property?   | portion you own?  |  |
|      |  |             | At least one of the debtor   | s and another   | <u> </u>   |   |  |
|      |  |             | Check if this is commur  | nity property (see  |  |   |  |
|      |  | •           | er recreational vehicles, other<br>t, fishing vessels, snowmobiles, r  | •   |  |   |  |
| Exa  | mples: Boats, trailers, motors   | •           | er recreational vehicles, other  | motorcycle accessor   | Do not deduct secured the amount of any secu   | red claims on <i>Schedule</i>   |  |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •           | er recreational vehicles, other<br>t, fishing vessels, snowmobiles, r<br>Who has an interest in the  | motorcycle accessor   | Do not deduct secured  | red claims on <i>Schedule</i>   |  |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:  | •           | who has an interest in the jone.   | motorcycle accessor   | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule ims Secured by Propert Current value of the  |  |
| Exar | nples: Boats, trailers, motors<br>No<br>Yes<br>Make<br>Model:<br>Year:   | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on  | motorcycle accessor property? Check   | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on <i>Schedule</i>   |  |
| Exar | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only At least one of the debtor.   | motorcycle accessor  property? Check  hly s and another   | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule<br>hims Secured by Propert<br>Current value of the   |  |
| Exar | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:   | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on  | motorcycle accessor  property? Check  hly s and another   | Do not deduct secured the amount of any secu Creditors Who Have Cla  | red claims on Schedule<br>hims Secured by Propert<br>Current value of the   |  |
| 4.1  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:                                     | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions)  Who has an interest in the one.  | property? Check  bly s and another  hity property (see  | Do not deduct secured the amount of any secu Creditors Who Have Cla  Current value of the entire property?  Do not deduct secured  | red claims on Schedule hims Secured by Propert  Current value of the portion you own?  claims or exemptions. F  |  |
| 4.1  | Make Model: Other information:  Make Model: Make Model: Make Model: Model: Model: Model: Model: Model:                                     | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtor instructions)  Who has an interest in the one.  | property? Check  bly s and another  hity property (see  | Do not deduct secured the amount of any secuce Creditors Who Have Classes Current value of the entire property?  Do not deduct secured the amount of any secu  | claims or Schedule of the portion you own?  |  |
| 4.1  | nples: Boats, trailers, motors  No  Yes  Make  Model:  Year:  Approximate mileage:  Other information:                                     | •           | who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors instructions)  Who has an interest in the one. Debtor 1 and Debtor 2 on Debtor 3 and Debtor 4 debtors instructions)  | property? Check  bly s and another  hity property (see  | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the Secured Creditors Who Have Clate Creditors | red claims on Schedule ims Secured by Propen  Current value of the portion you own?  claims or exemptions. I used claims on Schedule ims Secured by Propen                        |  |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •           | who has an interest in the one. Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the one. Debtor 1 and Debtor 2 on Debtor 2 on Debtor 3 and Debtor 3 on Debtor 3 on Debtor 4 one. Debtor 4 only Debtor 5 only Debtor 6 only  | property? Check  hly s and another hity property (see property? Check   | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. It is claims on Schedule ims Secured by Propert  Current value of the |  |
| 4.1  | Make Model: Approximate mileage: Other information:  Make Model: Year: Approximate mileage: Other information:                             | •           | who has an interest in the one.  Debtor 1 and Debtor 2 on At least one of the debtor instructions)  Who has an interest in the one.  Debtor 1 and Debtor 2 on Debtor 2 on Debtor 1 and Debtor 2 on Debtor 1 only  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 on Debtor 2 only | property? Check  hly s and another hity property (see property? Check   | Do not deduct secured the amount of any secu Creditors Who Have Clate Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Clate Creditors Who Have Clate Creditors Who Have Clate Control of the Secured Creditors Who Have Clate Creditors | red claims on Schedule ims Secured by Propent Current value of the portion you own?  claims or exemptions. If the claims on Schedule ims Secured by Propentities.                 |  |
| 4.1  | mples: Boats, trailers, motors  No Yes  Make Model: Year: Approximate mileage:  Other information:  Make Model: Year: Approximate mileage: | •           | who has an interest in the one. Debtor 1 and Debtor 2 on At least one of the debtor. Check if this is communinstructions) Who has an interest in the one. Debtor 1 and Debtor 2 on Debtor 2 on Debtor 3 and Debtor 3 on Debtor 3 on Debtor 4 one. Debtor 4 only Debtor 5 only Debtor 6 only  | property? Check  The sand another check  The property? Check  The property? Check  The property? Check  The property? Check  The property and another check  The property? Sand another check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property?  Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the  | red claims on Schedule ims Secured by Propert  Current value of the portion you own?  claims or exemptions. It is claims on Schedule ims Secured by Propert  Current value of the |  |

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used living room furniture, used dining room furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Used cell phone, used tv \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... Used clothing \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1350.00 for Part 3. Write that number here .....

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes ..... \$20.00 Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: Rush Prepaid Card \$0.00 17.7. Other financial account: 2 Security Income Cards \$30.00 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Sheryl           |  | Franklin                    | Case number (if known)                       |  |
|------|------------------------|--|-----------------------------|--|--|
|      | First Name             | Middle Name  | Last Name                   |  |  |
| 20.  | Negotiable instruments | porate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe assuer name: | checks, promissory no       | tes, and money orders.                       |  |
|      |                        |  |                             |  |  |
| 21.  | Retirement or pension  |  | thrift savings accounts     | s, or other pension or profit-sharing plans  |  |
|      | No No                  | 11A, E1110A, 1000g11, 401(k), 400(b)   | , tillit savings accounts   | , or other pension of profit-straining plans |  |
|      | Yes. List each         | Type of account:   | Institution name:           |  |  |
|      | account                | 401(k) or similar plan:  |                             |  |  |
|      | separately.            |  | -                           |  |  |
|      |                        | Pension plan:  |                             |  |  |
|      |                        | IRA:   |                             |  |  |
|      |                        | Retirement account:  |                             |  |  |
|      |                        | Keogh:   |                             |  |  |
|      |                        | Additional account:  |                             |  |  |
|      |                        | Additional account:  |                             |  |  |
| 22.  |                        | prepayments d deposits you have made so that with landlords, prepaid rent, public Electric:                      |                             |  |  |
|      | _                      | Gas:   |                             |  |  |
|      |                        | Heating oil:   |                             |  |  |
|      |                        | -  |                             |  |  |
|      |                        | Security deposit on rental unit:  Prepaid rent:  |                             |  |  |
|      |                        | •  |                             |  |  |
|      |                        | Telephone:   |                             |  |  |
|      |                        | Water:   |                             |  |  |
|      |                        | Rented furniture:  |                             |  |  |
|      |                        | Other:   |                             |  |  |
| 23.  | _                      | or a periodic payment of money to  | you, either for life or for | r a number of years)                         |  |
|      | <b>✓</b> No            | Issuer name and description:   |                             |  |  |
|      | Yes                    |  |                             |  |  |
|      |                        |  |                             | _  |  |
|      |                        |  |                             |  |  |
|      |                        |  |                             |  |  |

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| Debt | tor 1 Sheryl<br>First Name  | Middle  | Franklin<br>Name Last Name   | Case number (if known)   |  |
|------|---|---|--|--|--|
| 24.  | Interests in a  | n education IRA, in an acc  | ount in a qualified ABLE program, o  | or under a qualified state tuition program.  |  |
|      | ✓ No  | 530(b)(1), 529A(b), and 529(  | b)(1).  otion. Separately file the records of any                              | interests.11 U.S.C. § 521(c):  |  |
|      | Yes   |   |  |  |  |
|      |   |   |  |  |  |
| 25.  |   | able or future interests in por<br>or your benefit  | property (other than anything listed   | in line 1), and rights or powers   |  |
|      | ✓ No<br>Yes. Desc   | ribe  |  |  |  |
| 26.  |   |   | secrets, and other intellectual propers, proceeds from royalties and licensing |  |  |
|      | Ves. Desc   | ribe  |  |  |  |
| 27.  | Examples: Bu  | nchises, and other general<br>Iding permits, exclusive licen  | intangibles<br>ses, cooperative association holdings,                          | liquor licenses, professional licenses   |  |
|      | Yes. Desc   | ribe  |  |  |  |
|      |   |   |  |  |  |
| Моі  | ney or propei   | ty owed to you?   |  |  | Current value of the portion you own?  Do not deduct secured claims or exemptions.   |
|      | Tax refunds or  |   |  |  | portion you own? Do not deduct secured   |
|      | Tax refunds or  ✓ No  |   |  | Federal:   | portion you own? Do not deduct secured   |
|      | Tax refunds or  No Yes. Give s about  | wed to you specific information t them, including whether already filed the returns   |  | Federal:<br>State:   | portion you own?  Do not deduct secured claims or exemptions.  |
| 28.  | Tax refunds on  ✓ No  Yes. Give s about you a and f   | wed to you specific information t them, including whether already filed the returns the tax years   |  |  | portion you own? Do not deduct secured claims or exemptions.   |
|      | Tax refunds or  No Yes. Give s about you a and it   | specific information t them, including whether already filed the returns the tax years  | spousal support, child support, mainte   | State:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past   | wed to you  specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s   | spousal support, child support, mainte   | State:  Local: nance, divorce settlement, property settlemen   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past   | specific information t them, including whether already filed the returns the tax years  | spousal support, child support, mainte   | State:<br>Local:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past   | wed to you  specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s   | spousal support, child support, mainte   | State:  Local:  nance, divorce settlement, property settlement  Alimony:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00   |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past   | wed to you  specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s   | spousal support, child support, mainte   | State:  Local:  nance, divorce settlement, property settlement  Alimony:  Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00  |
| 28.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past   | wed to you  specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s   | spousal support, child support, mainte   | State:  Local:  nance, divorce settlement, property settlement  Alimony:  Maintenance:  Support:                                     | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00   |
| 29.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years   |  | State: Local: nance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement:                      | \$0.00 |
| 29.  | Tax refunds or  ✓ No  Yes. Give s about you a and to  Family support Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp | specific information t them, including whether already filed the returns he tax years  t due or lump sum alimony, s specific information  s someone owes you aid wages, disability insurance ial Security benefits; unpaid to | ce payments, disability benefits, sick pa                                      | State: Local: nance, divorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |

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| Deb <sup>-</sup> | tor 1 Sheryl   |                            | Franklin                       | Case number (if known)                           |  |
|------------------|--|----------------------------|--------------------------------|--|--|
|                  | First Name   | Middle Name                | Last Name                      | <del></del>                                      |  |
| 31.              | Interests in insurance policie Examples: Health, disability, or                                |                            | ings account (HSA); credit, h  | omeowner's, or renter's insurance                |  |
|                  | No Yes. Name the insurance of each policy and list its variety.                                | ompany                     | oany name:                     | Beneficiary:                                     | Surrender or refund value:   |
| 32.              | Any interest in property that If you are the beneficiary of a liv property because someone has | ring trust, expect proceed |                                | , or are currently entitled to receive           |  |
|                  | Yes. Describe  |                            |                                |  |  |
| 33.              | Claims against third parties, Examples: Accidents, employm                                     |                            |                                | a demand for payment                             |  |
|                  | Yes. Describe  |                            |                                |  |  |
| 34.              | Other contingent and unliqui   | –<br>dated claims of every | nature, including counterc     | claims of the debtor and rights                  |  |
|                  | No Yes. Describe   |                            |                                |  |  |
| 35.              | Any financial assets you did i   | –<br>าot already list      |                                |  |  |
|                  | Yes. Describe  |                            |                                |  |  |
| 36.              | Add the dollar value of all of for Part 4. Write that number                                   | -                          |                                |  | \$50.00  |
| Part             | 5: Describe Any Busines  | s-Related Property         | You Own or Have an Ir          | nterest In. List any real estate in Part         | 1.   |
| 37.              | Do you own or have any legal   | or equitable interest      | in any business-related pro    | operty?  |  |
|                  | No. Go to Part 6. Yes. Go to line 38.  |                            |                                | <b>p</b> D                                       | urrent value of the ortion you own? o not deduct secured claims r exemptions |
| 38.              | Accounts receivable or comm  | nissions you already e     | arned                          |  |  |
|                  | Yes. Describe  |                            |                                |  |  |
| 39.              | Office equipment, furnishings<br>Examples: Business-related cor                                |                            | ems, printers, copiers, fax ma | ichines, rugs, telephones, desks, chairs, electr | ronic devices  |
|                  | ✓ No Yes. Describe   |                            |                                |  |  |
|                  |  | _                          |                                |  |  |

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| Debt         | tor 1 Sheryl  | Franklin                                  | Case number (if known)        |  |
|--------------|---|---|-------------------------------|--|
| 1.0          | First Name Middle Name                              |   |                               |  |
| 40.          | Machinery, fixtures, equipment, supplies you        | u use in business, and tools of your t    | rade                          |  |
|              | <b>✓</b> No   |   |                               |  |
|              | Yes. Describe                                       |   |                               |  |
|              |   |   |                               |  |
| 41           | Inventory   |   |                               |  |
|              |   |   |                               |  |
|              | ✓ No  |   |                               |  |
|              | Yes. Describe                                       |   |                               |  |
|              |   |   |                               |  |
| 42.          | Interests in partnerships or joint ventures         |   |                               |  |
|              | ✓ No  |   |                               |  |
|              | Yes. Give specific                                  | Name of entity:                           | % of ownership:               |  |
|              | information about                                   |   |                               |  |
|              | them  |   |                               |  |
|              |   |   |                               | _  |
|              |   |   |                               |  |
| 43. <b>C</b> | Customer lists, mailing lists, or other compila     | itions                                    |                               |  |
|              | <b>✓</b> No   |   |                               |  |
|              | Yes. Do your lists include personally identifi      | iable information (as defined in 11 U.S.0 | C. § 101(41A))?               |  |
|              | ☐ No  |   |                               |  |
|              | Yes. Describe                                       |   |                               |  |
|              | Too. Describe                                       |   |                               |  |
| 44.          | Any business-related property you did not a         | Iready list                               |                               |  |
|              | <b>✓</b> No   |   |                               |  |
|              | Yes. Give specific                                  |   |                               | <u> </u>                                   |
|              | information   |   |                               | <u> </u>                                   |
|              |   |   |                               |  |
|              |   |   |                               | <u> </u>                                   |
|              |   |   |                               | <del></del>                                |
|              |   |   |                               | <u> </u>                                   |
|              |   |   |                               |  |
|              |   |   |                               | <u> </u>                                   |
| 45. A        | dd the dollar value of all of your entries from     | Part 5, including any entries for pag     | jes you have attached         |  |
|              | art 5. Write that number here                       |   |                               |  |
|              | 6: Describe Any Farm- and Commerc                   | ial Fishing-Related Property Yo           | ou Own or Have an Interest In |  |
| Part         | If you own or have an interest in farmland, list it |   |                               |  |
| 46.          | Do you own or have any legal or equitable in        | nterest in any farm- or commercial f      | ishing-related property?      |  |
|              | No. Co to Port 7                                    | 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3        |                               | Current value of the                       |
|              | No. Go to Part 7.                                   |   |                               | portion you own?                           |
|              | Yes. Go to line 47.                                 |   |                               | Do not deduct secured claims or exemptions |
| 47.          | Farm animals  |   |                               | or oxomptions                              |
|              | Examples: Livestock, poultry, farm-raised fish      |   |                               |  |
|              | <b>✓</b> No   |   |                               |  |
|              | Yes. Describe                                       |   |                               |  |
|              |   |   |                               |  |
|              |   |   | '                             |  |

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| Deb          | · _ ·  | Franklin               | Case number (if known)       |              |
|--------------|--|------------------------|------------------------------|--------------|
|              | First Name Middle Name   | Last Name              |                              |              |
| 48.          | Crops-either growing or harvested  |                        |                              |              |
|              | No   |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
| 49.          | Farm and fishing equipment, implements, machinery, fixtur                                      | es, and tools of trade |                              |              |
|              | <b>✓</b> No  |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| 50           | Farm and fishing supplies, chemicals, and feed   |                        |                              |              |
| 30.          | —  |                        |                              |              |
|              | ✓ No   |                        |                              |              |
|              | Yes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| 51.          | Any farm- and commercial fishing-related property you did                                      | not already list       |                              |              |
|              | No.  | •                      |                              |              |
|              | ✓ No  Yes. Describe  |                        |                              |              |
|              | Tes. Describe  |                        |                              |              |
|              |  |                        |                              |              |
| 52 A         | dd the dellar value of all of your entries from Part 6, includin                               | a any entries for page | s you have attached          |              |
|              | dd the dollar value of all of your entries from Part 6, includin art 6. Write that number here |                        |                              |              |
| <b>&gt;</b>  |  |                        | L                            |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
| Part         | 7: Describe All Property You Own or Have an Interes  | est in That You Did I  | Not List Above               |              |
| 53.          | Do you have other property of any kind you did not already                                     | list?                  |                              |              |
|              | Examples: Season tickets, country club membership  |                        |                              |              |
|              | ✓ No   |                        |                              |              |
|              | Yes. Give specific   |                        |                              |              |
|              | information  |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
| 54. A        | dd the dollar value of all of your entries from Part 7. Write th                               | at number here         |                              | <u> </u>     |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
|              |  |                        |                              |              |
| Part         | 8: List the Totals of Each Part of this Form   |                        |                              |              |
| ıaıı         | 6. Else the rotals of Edon't are of this form  |                        |                              |              |
| 55.          | Part 1: Total real estate, line 2  |                        | <b>&gt;</b>                  |              |
|              |  |                        |                              |              |
| 56.          | part 2 total vehicles, line 5  | \$9475.00              |                              |              |
| 57. <b>F</b> | Part 3: Total personal and household items, line 15  |                        | _                            |              |
|              |  | \$1350.00              | -                            |              |
| 58.F         | Part 4: Total financial assets, line 36  | \$50.00                | _                            |              |
| 59.          | Part 5: Total business-related property, line 45   |                        |                              |              |
| 60.          | Part 6: Total farm- and fishing-related property, line 52                                      |                        | _                            |              |
| 61           | Part 7: Total other property not listed, line 54   |                        | _                            |              |
|              |  |                        |                              |              |
| 62.          | Total personal property. Add lines 56 through 61   | \$10875.00             |                              | + \$10875.00 |
|              |  |                        | Copy personal property total |              |
|              |  |                        |                              | \$10875.00   |
| 63. <b>T</b> | otal of all property on Schedule A/B. Add line 55 + line 62                                    |                        |                              |              |

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| Debtor 1 | Sheryl     |             | Franklin  | Case number (if known) |  |
|----------|------------|-------------|-----------|------------------------|--|
|          | Eirot Nomo | Middle Neme | Last Namo |                        |  |

#### Schedule A/B: Property. Additional page

| Part 3: Describe Your Personal and Household Items |   |  |  |  |  |  |
|--|---|--|--|--|--|--|
| Do you own or have                                 | ve any legal or equitable interest in any of the following items? | Current value of the portion you own?  Do not deduct secured claims or exemptions. |  |  |  |  |
| 6.2. Household good                                | ds and furnishings  |  |  |  |  |  |
| No Yes. Describe                                   | Used Bedroom Furniture  | \$500.00   |  |  |  |  |

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| Fill in this information to identify your case: |            |             |                              |  |  |  |
|---|------------|-------------|------------------------------|--|--|--|
| Debtor 1  | Sheryl     |             | Franklin                     |  |  |  |
|   | First Name | Middle Name | Last Name                    |  |  |  |
| Debtor 2  | Jesse      |             | Franklin                     |  |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                    |  |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois (State) |  |  |  |
| Case number<br>(If known)                       |            |             | (Otato)                      |  |  |  |

#### Official Form 106C

#### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | t 1: Identify the Property You Clair  | m as Exempt  |   |  |  |  |  |
|-----|---|--|---|--|--|--|--|
| 1.  | Which set of exemptions are you claim   | ing? Check one only, ev  | ven if your spouse is filing with you.                                    |  |  |  |  |
|     | You are claiming state and federal  | nonbankruptcy exemp  | otions. 11 U.S.C. § 522(b)(3)   |  |  |  |  |
|     | You are claiming federal exemption  | ns. 11 U.S.C. § 522(b)(2   | 2)  |  |  |  |  |
| 2.  | For any property you list on Schedule A   | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |   |  |  |  |  |
|     | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own   | Amount of the exemption you claim  Check only one box for each exemption. | Specific laws that allow exemption           |  |  |  |
|     |   | Copy the value from<br>Schedule A/B  |   |  |  |  |  |
|     | Brief description:  | \$9,475.00   | \$0   | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |  |  |  |
|     | Toyota Highlander,<br>2007, 2007 Toyota<br>Highlander                               |  | 100% of fair market value, up to any applicable statutory limit           | -  |  |  |  |
|     | Line from Schedule A/B: 03  |  |   |  |  |  |  |
|     | Brief   | ¢200.00  |   | 735 ILCS 5/12-1001(b)                        |  |  |  |
|     | description: Used living room   | \$300.00   | \$300.00  |  |  |  |  |
|     | furniture, used dining room furniture   |  | 100% of fair market value, up to any applicable statutory limit           | _  |  |  |  |
|     | Line from Schedule A/B: 06  |  |   |  |  |  |  |
| 3.  | Are you claiming a homestead exempti<br>(Subject to adjustment on 4/01/19 and ev    |  | 375?<br>cases filed on or after the date of adjustment.)                  |  |  |  |  |
|     | <b>✓</b> No   |  |   |  |  |  |  |
|     | Yes. Did you acquire the property cov   | ered by the exemption w  | vithin 1,215 days before you filed this case?                             |  |  |  |  |
|     | No  |  |   |  |  |  |  |
|     | Yes   |  |   |  |  |  |  |

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Debtor 1 Sheryl Franklin Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$400.00 description: V \$400.00 **Used clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$20.00 description: **✓** \$20.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(b) Brief \$150.00 description: **✓** \$150.00 Used cell phone, used tv 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 07 735 ILCS 5/12-1001(b) Brief \$500.00 description: **Used Bedroom Furniture** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$0.00 description: **✓** \$0 Other financial account, 100% of fair market value, up to any **Rush Prepaid Card** applicable statutory limit Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) \$30.00 description: \$30.00

100% of fair market value, up to any

applicable statutory limit

Other financial account,

2 Security Income Cards

17

Line from Schedule A/B: Case 18-04209 Doc 1 Filed 02/16/18 Entered 02/16/18 11:52:25 Desc Main Document Page 23 of 69

|                  |  | 0  |                                   |                          |                     |
|------------------|--|--|-----------------------------------|--------------------------|---------------------|
| Fill in          | this information to identify your              | case:  |                                   |                          |                     |
| Debto            | or 1 Sheryl                                    | Franklin   |                                   |                          |                     |
|                  | First Name                                     | Middle Name Last Name  |                                   |                          |                     |
| Debto            |  | Franklin   |                                   |                          |                     |
| (Spous           | e, if filing) First Name                       | Middle Name Last Name  |                                   |                          |                     |
| United           | d States Bankruptcy Court for the              | : Northern District of Illinois  |                                   |                          |                     |
|                  |  | (State)  |                                   |                          |                     |
| Case<br>(If know | number<br><sub>vn)</sub>                       |  |                                   |                          |                     |
| <b>○</b> tt.     | :-:-I  |  |                                   | Г                        | Check if this is an |
| Uπ               | icial Form 106D                                |  |                                   | _                        | amended filing      |
| Scl              | hedule D: Cred                                 | itors Who Have Claims Secure   | d by Prop                         | ertv                     | 12/15               |
|                  |  |  |                                   |                          |                     |
|                  |  | sible. If two married people are filing together, both are equa<br>itional Page, fill it out, number the entries, and attach it to tl  |                                   |                          |                     |
|                  | and case number (if known).                    |  |                                   | , , , , , , , , ,        | 311,                |
| 1.               | Do any creditors have claims                   | secured by your property?  |                                   |                          |                     |
| Г                | No. Check this box and su                      | bmit this form to the court with your other schedules. You hav   | e nothing else to rep             | ort on this form.        |                     |
| ľ                | Yes. Fill in all of the informa                |  | 5                                 |                          |                     |
|                  | <b>—</b>                                       |  |                                   |                          |                     |
| Part '           | 1: List All Secured Claims                     |  |                                   |                          |                     |
| 2.               |  | editor has more than one secured claim, list the creditor  | Column A                          | Column B                 | Column C            |
|                  | ·  | e than one creditor has a particular claim, list the other creditors list the claims in alphabetical order according to the creditor's | Amount of claim Do not deduct the | Value of                 | Unsecured           |
|                  | name.  | ist the claims in alphabetical order according to the creditor s   | value of collateral.              | collateral that supports | portion<br>If any   |
|                  |  |  | value of conatoral.               | this claim               | ii airy             |
| 2.1              | GATEWAY 1                                      | Describe the property that secures the claim:  | \$9,715.00                        | \$9,475.00               | \$240.00            |
|                  | Creditor's Name                                | 2007 Toyota Highlander   |                                   | •                        |                     |
|                  | 3818 E CORONADO  Number Street                 | As of the date you file, the claim is: Check all that apply.   |                                   |                          |                     |
|                  |  | Contingent   |                                   |                          |                     |
|                  | ANAHEIM CA 92807                               | Unliquidated   |                                   |                          |                     |
|                  | City State ZIP Co                              | de Disputed  |                                   |                          |                     |
|                  | Who owes the debt? Check or                    | ie. 🗀  |                                   |                          |                     |
|                  | Debtor 1 only                                  | Nature of lien. Check all that apply.  |                                   |                          |                     |
|                  | Debtor 2 only                                  | An agreement you made (such as mortgage or secured car loan)   |                                   |                          |                     |
|                  | Debtor 1 and Debtor 2 only                     | Statutory lien (such as tax lien, mechanic's lien)   |                                   |                          |                     |
|                  | At least one of the debtors and another        | Judgment lien from a lawsuit   |                                   |                          |                     |
|                  | Check if this claim relate                     |  |                                   |                          |                     |
|                  | to a community debt                            |  |                                   |                          |                     |
|                  | Date debt was 1/2015 incurred                  | <ul> <li>Last 4 digits of account number5696</li> </ul>  |                                   |                          |                     |
| 2.2              | Value City                                     | Describe the managed that account the eleium   | \$1,500.00                        | \$500.00                 | \$1,000.00          |
|                  | Creditor's Name                                | Describe the property that secures the claim:  | Ψ.,σσσ.σσ                         |                          | <u> </u>            |
|                  | 1101 North Ave Number Street                   | As of the date you file, the claim is: Check all that apply.   |                                   |                          |                     |
|                  |  | Contingent   |                                   |                          |                     |
|                  | Melrose Park IL 60160                          |  |                                   |                          |                     |
|                  | City State ZIP Co.                             |  |                                   |                          |                     |
|                  | Who owes the debt? Check or                    |  |                                   |                          |                     |
|                  | Debtor 1 only                                  | Nature of lien. Check all that apply.  |                                   |                          |                     |
|                  | Debtor 2 only                                  | An agreement you made (such as mortgage or secured   |                                   |                          |                     |
|                  | Debtor 1 and Debtor 2 only                     | car loan)  Statutory lien (such as tax lien, mechanic's lien)  |                                   |                          |                     |
|                  | At least one of the debtors                    |  |                                   |                          |                     |
|                  | and another  Check if this claim relate        | Judgment lien from a lawsuit   |                                   |                          |                     |
|                  | Check if this claim relate to a community debt | Other (including a right to offset)  |                                   |                          |                     |
|                  | Date debt was                                  | Last 4 digits of account number  |                                   |                          |                     |
|                  | incurred                                       | of your entries in Column A on this page. Write that number  | \$11.215.00                       |                          |                     |

here:

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| Fill in t                   | this inforr                                       | nation to identify your c  | ase:  |  |   |   |
|-----------------------------|---|--|---|--|---|---|
| Debtor                      | r 1   | Sheryl<br>First Name   | Middle Name   | Franklin<br>Last Name  |   |   |
| Debtor                      | _   | Jesse  |   | Franklin   |   |   |
| (Spouse                     | e, if filing)                                     | First Name   | Middle Name   | Last Name  |   |   |
|                             |   | ankruptcy Court for the:   | Northern  | District of Illinois (State)   |   |   |
| Case n                      | number<br>n)                                      |  |   |  | <del></del>   |   |
| Offic                       | cial Fo   | orm 106E/F   |   |  |   | Check if this is an amended filing  |
|                             |   |  | ditors Who  | <b>Have Unsec</b>  | ured Claims   | 12/1  |
| other p<br>Form 1<br>claims | oarty to a<br>06A/B) a<br>that are<br>tries in th | iny executory contracts<br>and on Schedule G: Exe<br>listed in Schedule D: C | s or unexpired leases tha<br>cutory Contracts and Un<br>reditors Who Hold Claim | t could result in a claim. Al<br>expired Leases (Official For<br>s Secured by Property. If m | lso list executory contracts<br>rm 106G). Do not include a<br>ore space is needed, copy | th NONPRIORITY claims. List the son Schedule A/B: Property (Official my creditors with partially secured the Part you need, fill it out, number write your name and case number (if |
| Part 1                      | List A  | All of Your PRIORITY   | / Unsecured Claims  |  |   |   |
| _                           | _ •   | editors have priority un<br>Go to Part 2.                                    | secured claims against y  | you?   |   |   |
| lis                         | sted, iden  | tify what type of claim it   | is. If a claim has both prior   | ity and nonpriority amounts, I   | list that claim here and show   | parately for each claim. For each claim both priority and nonpriority amounts. iority unsecured claims, fill out the  |

Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Priority

amount

Nonpriority

amount

Total

claim

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** ACCEPTANCE NOW 4.1 \$2,973.00 Last 4 digits of account number 5174 Nonpriority Creditor's Name When was the debt incurred? 7/2016 6288 Dawson Blvd Number Street As of the date you file, the claim is: Check all that apply. Contingent 30093 Norcross Georgia Unliquidated City Zip Code State Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify \_ 024 UnknownLoanType Is the claim subject to offset? **✓** No Yes AFNI, INC 4.2 \$290.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3/2017 PO Box 3517 Street Number As of the date you file, the claim is: Check all that apply. Contingent 61702 Bloomington Illinois Unliquidated City Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: **✓** No COMCAST: ACCOUNT INFORMATION DISPUTED BY Yes Other. Specify CONSUMER City of Chicago - Parking and red Light Tickets \$8,000.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60680 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Unpaid Tickets Other. Specify \_\_\_\_ Is the claim subject to offset? No Yes

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 **DPT TREASURY** \$113.00 Last 4 digits of account number Nonpriority Creditor's Name P O BOX 2451 When was the debt incurred? 1/2017 Street Number As of the date you file, the claim is: Check all that apply. Contingent 35201 **BIRMINGHAM** Alabama Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: **V** Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ InstallmentLoan Is the claim subject to offset? **✓** No Yes PORTFOLIO RC \$967.00 Last 4 digits of account number 8427 Nonpriority Creditor's Name 6/2016 120 Corporate Boulevard When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar

**V** 

Other. Specify

001 Collection; Collecting for

**ORIGINAL CREDITOR: 08** 

SYNCHRONY BANK; ACCOUNT INFORMATION DISPUTED BY

CONSUMER

Check if this claim relates to a community debt

Is the claim subject to offset?

**✓** No

Yes

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Debtor 1 Sheryl Franklin Case number (if known)

| FIRST Na                 | me Middle Name Last Name  |         |                      |        |
|--------------------------|---|---------|----------------------|--------|
| Part 4: Add t            | ne Amounts for Each Type of Unsecured Claim   |         |                      |        |
|                          | amounts of certain types of unsecured claims. This information is<br>nounts for each type of unsecured claim. | s for s | tatistical reporting | purpos |
|                          |   |         | Total claims         |        |
| Total claims from Part 1 | 6a. Domestic support obligations.   | 6a.     | \$0.00               |        |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b.     | \$0.00               |        |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c.     | \$0.00               |        |
|                          | 6d. Other. Add all other priority unsecured claims. Write that  | 6d.     | \$0.00               |        |
|                          | amount here.  6e. Total. Add lines 6a through 6d.   | 6e.     | \$0.00               |        |
|                          | ve. Total. Add lines va tillough vu.  | oe.     |                      |        |
|                          |   |         | Total claims         |        |
| Total claims from Part 2 | 6f. Student loans   | 6f.     | \$0.00               |        |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6g.     | \$0.00               |        |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts   | 6h.     | \$0.00               |        |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                                | 6i.     | \$12,343.00          |        |
|                          | 6i Total Add lines 6f through 6i  | 6i      | \$12,343.00          |        |

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| Fill in this information to identify your case: |                           |             |   |  |  |
|---|---------------------------|-------------|---|--|--|
| Debtor 1  | Sheryl                    |             | Franklin                                |  |  |
|   | First Name                | Middle Name | Last Name                               |  |  |
| Debtor 2  | Jesse                     |             | Franklin                                |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                               |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State)            |  |  |
| Case number                                     |                           |             | (************************************** |  |  |

#### Official Form 106G

| П | Check if this is an |
|---|---------------------|
|   | amended filing      |

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease |                           |          |          | State what the contract or lease is for           |
|--|---------------------------|----------|----------|---|
| 2.1  | Covington, Mrs.<br>Name   |          | <u>.</u> | Residential Lease,<br>Other,<br>Residential Lease |
|  | 4937 W Maypole Ave Unit B |          |          | 1000011111 2000                                   |
|  | Number                    | Street   | _        |   |
|  | Chicago                   | Illinois | 60644    |   |
|  | City                      | State    | Zip Code |   |

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| Fill in this infor        | mation to identify your c | ase:        |                      |                                    |
|---------------------------|---------------------------|-------------|----------------------|------------------------------------|
| Debtor 1                  | Sheryl                    |             | Franklin             |                                    |
|                           | First Name                | Middle Name | Last Name            |                                    |
| Debtor 2                  | Jesse                     |             | Franklin             |                                    |
| (Spouse, if filing)       | First Name                | Middle Name | Last Name            |                                    |
| United States E           | Bankruptcy Court for the: | Northern    | District of Illinois |                                    |
|                           |                           |             | (State)              |                                    |
| Case number<br>(If known) |                           |             |                      |                                    |
|                           |                           |             |                      | Check if this is an amended filing |
| Official                  | Form 106H                 |             |                      |                                    |

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| knov | ). Answer every question.   |
|------|---|
| 1.   | o you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)  |
|      | <b>7</b> No   |
|      | Yes   |
| 2.   | lithin the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, laho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  |
|      | No. Go to line 3.   |
|      | Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?   |
|      | ▼ No  |
|      | Yes. In which community state or territory did you live? Fill in the name and current address of that person.   |
|      | Name of your spouse, former spouse, or legal equivalent   |
|      | Number Street   |
|      | Number Street   |
|      | City State Zip Code   |
| 3.   | Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 gain as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), chedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. |
|      | column 1: Your codebtor Column 2: The creditor to whom you owe the debt   |
|      | Check all schedules that apply:   |
|      |   |

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|                          |  | D00  | Jumeni Paç                    | je 30 01 09        |  |   |
|--------------------------|--|--|-------------------------------|--------------------|--|---|
| Fill in this int         | formation to identify  | your case:   |                               |                    |  |   |
| Debtor 1                 | Sheryl   |  | Franklin                      |                    |  |   |
|                          | First Name   | Middle Name  | Last Name                     |                    | Check if this is:                      |   |
| Debtor 2                 | Jesse  | A 4° I dia A 1 a a a                                     | Franklin                      |                    | An amended filing                      |   |
| (Spouse, if filing)      | First Name   | Middle Name  | Last Name                     |                    |  | nast natition shouter 10                |
|                          | Bankruptcy Court for   | Northern   | District of Illinois          |                    | expenses as of the foll                | post-petition chapter 13<br>owing date: |
| the:<br>Case number      |  |  | (State)                       |                    | ·                                      | · ·                                     |
| (If known)               | -  |  |                               |                    | MM / DD / YYYY                         |   |
| Official                 | Form 106I  |  |                               |                    |  |   |
| Schedu                   | le I: Your In  | come   |                               |                    |  | 12/15                                   |
| number (if kr            | ore space is needed<br>nown). Answer ever<br>scribe Employme | y question.  | et to this form. On           | the top of any     | additional pages, write y              | our name and case                       |
| 1. Fill in you           | r employment   |  | Debtor 1                      |                    | Debtor 2                               |   |
| informatio               | on.  | Employment status  | - Frankriad                   |                    |  |   |
|                          | e more than one job,<br>eparate page with                    | zmproyment otatae  | Employed  Not Employed        |                    | Employed  Not Employed                 |   |
|                          | n about additional   |  | Wot Employed                  |                    | Not Employed                           |   |
| employers                |  | Occupation   |                               |                    |  |   |
| Include pa<br>self-emplo | art time, seasonal, or                                       | Employer's name  |                               |                    |  |   |
|                          | •  | Employer's address                                       |                               |                    |  |   |
|                          | n may include student aker, if it applies.                   |  | Number Street                 |                    | Number Street                          | _                                       |
|                          |  |  |                               |                    |  |   |
|                          |  |  |                               |                    |  |   |
|                          |  |  |                               |                    |  |   |
|                          |  |  | City                          | State Zip C        | Code City                              | State Zip Code                          |
|                          |  | How long employed there?                                 |                               |                    |  | _                                       |
| Part 2: Giv              | ve Details About N   | Nonthly Income   |                               |                    |  |   |
|                          | onthly income as of t<br>ss you are separated.               | the date you file this forn                              | <b>n.</b> If you have nothing | to report for any  | $\eta$ line, write \$0 in the space. I | nclude your non-filing                  |
|                          | r non-filing spouse have<br>attach a separate she            |  | combine the informa           | tion for all emplo | yers for that person on the lir        | nes below. If you need                  |
|                          | -  |  |                               | For Debtor 1       | For Debtor 2 or non-filing spouse      |   |
|                          |  | ary, and commissions (before, calculate what the monthly |                               | \$                 | 0.00 \$0                               | 00                                      |

+ \$0.00

\$0.00

+ \$0.00

\$0.00

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

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| Copy line 4 here  | Debtor                 | T 1Sheryl First Name Middle Name  | Franklin<br>Last Name        | Case number<br>known)  | (if        |            |
|---|------------------------|---|------------------------------|------------------------|------------|------------|
| Substitute   Sub  |                        | car rang  | 2401.114.1110                | ,                      |            |            |
| S. List all payroll deductions:   | Сору                   | / line 4 here   | <b>→</b> 4.                  | \$0.00                 | \$0.00     |            |
| St. Voluntary contributions for retirement plans   Sc.   \$0.00   \$0.00  | 5. <b>List</b> a       |   |                              |                        |            |            |
| 5c. Voluntary contributions for retirement plans  | 5a. 1                  | Tax, Medicare, and Social Security deductions   | 5a.                          | \$0.00                 | \$0.00     |            |
| 56. Required repayments of retirement fund loans 56. \$0.00 \$0.00 59. Union dues 57. Domestic support obligations 56. \$0.00 \$0.00 59. Union dues 59. Union dues 59. \$0.00 \$0.00 59. Union dues 59. Union dues 59. \$0.00 \$0.00 59. Union dues 59. Union dues 59. \$0.00 \$0.00 59. Union dues 59. \$0.00 \$0.00 59. Union dues 59. \$0.00 \$0.00 59. \$0.  | 5b. I                  | Mandatory contributions for retirement plans  | 5b.                          | \$0.00                 | \$0.00     |            |
| Solid Normatics   Solid Norm  | 5c. <b>\</b>           | Voluntary contributions for retirement plans  | 5c.                          | \$0.00                 | \$0.00     |            |
| 51. Domestic support obligations 59. Union dues 59. \$0.00 \$0.00 \$1. Other deductions. Specify: 50. \$1. \$0.00 \$1. Other deductions. Specify: 50. \$1. \$0.00 \$1. \$0.00 \$1. \$1. \$1. \$1. \$0.00 \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1. \$1.  | 5d. l                  | Required repayments of retirement fund loans  | 5d.                          | \$0.00                 | \$0.00     |            |
| 5g. Union dues 5h. Other deductions. Specify: 5h. + \$0.00 + \$0.00 5h. Other deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$0.00 + \$0.00 5h. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 \$0.00  8. List all other income regularly received: 8. List all other regular recei  | 5e. <b>I</b>           | Insurance   | 5e.                          | \$0.00                 | \$0.00     |            |
| 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$0.00  7. Calculate total menthly take-home pay. Subtract line 6 from line 4.  7. \$0.00  80.00  81. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receiplis, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linculate alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00  8c. \$0.00  8d. \$0.00  8d. \$0.00  8d. \$0.00  8d. \$0.00  8e. \$750.00  \$750.00  8f. \$107.00  \$161.00  \$9.00  8h. Other government assistance that you regularly receive linculate assistance and the value (if known) of any non-cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  8g. \$0.00  8h. Other monthly income. Specify:  8g. \$0.00  8h. Other monthly income. Specify:  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  9. \$857.00  \$10.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.  9. \$857.00  \$11. *\$9817.00  \$11. *\$9817.00  \$11. *\$9911.00  10. Calculate monthly income. Add lines 7 + line 9.  11. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other finends or relatives.  11. *\$0.00  *\$  | 5f. <b>C</b>           | Domestic support obligations  | 5f.                          | \$0.00                 | \$0.00     |            |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g 6. \$0.00 \$ | 5g. l                  | Union dues  | 5g.                          | \$0.00                 | \$0.00     |            |
| **Sh. List all other income regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions to the expenses that you regularly received:  8. List all other regular contributions from an unmaried partner, members of y  | 5h. (                  | Other deductions. Specify:  | 5h. +                        | <u>\$0.00</u> +        | \$0.00     |            |
| 8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross recipits, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify:  Food Assistance Programs Income  8f. \$107.00 \$161.00  8h. Other monthly income. Specify:  89 Add all other income Add line 8 a + 8 b + 8 d + 8   |                        | the payroll deductions. Add lines 5a + 5b + 5c + 5c   | d + 5e +5f + 5g 6.           | \$0.00                 | \$0.00     |            |
| 8a. Net income from rental property and from operating a business, profession, or farm Atlatch a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify;  Food Assistance Programs Income  8g. \$0.00 \$0.00  8h. Other monthly income. Specify:  8h. \$0.00 \$0.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$857.00  10. Calculate monthly income. Add line 7 + line 9. Add the enties in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$0.00  Combined Combined Monthly income.   | 7. Calc                | ulate total monthly take-home pay. Subtract line 6  | from line 4. 7.              | \$0.00                 | \$0.00     |            |
| Nuslness, profession, or farm Attach a statement for each property and business showing gross recipits, ordinary and necessary business expenses, and the total monthly net in come.  8a. \$0.00 \$0.00  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. \$0.00 \$750.00  8d. \$0.00 \$0.00  8d  | 8. List a              | all other income regularly received:  |                              |                        |            |            |
| gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00   | ŀ                      | business, profession, or farm   |                              |                        |            |            |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and properly settlement. 8c. \$0.00 \$0.00 8d. Unemployment compensation 8d. \$0.00 \$750.00 8e. Social Security 8e. \$750.00 \$750.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: 8f. \$107.00 \$161.00 8g. Pension or retirement income 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. \$0.00 \$857.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$857.00  10. Calculate monthly income. Add line 7 + line 9. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. **So.00**  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  |                        |   |                              |                        |            |            |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00                        | t                      | the total monthly net income.   | 8a.                          | \$0.00                 | \$0.00     |            |
| dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$750.00  8e. Social Security  8e. \$750.00 \$750.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits  under the Supplemental Nutrition Assistance Program) or  housing subsidies  Specify: Food Assistance Programs Income  8f. \$107.00 \$161.00  8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. + \$0.00 + \$0.00  9. Add all other income Add lines \$a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$8857.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other  friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  Combined  monthly income  | 8b. I                  | Interest and dividends  | 8b.                          | \$0.00                 | \$0.00     |            |
| divorce settlement, and property settlement.  8c. \$0.00 \$0.00  8d. Unemployment compensation  8d. \$0.00 \$0.00  8e. Social Security  8e. \$750.00 \$750.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income  8g. \$107.00 \$161.00  8g. Pension or retirement income  8g. \$0.00 \$0.00  8h. Other monthly income. Specify:  8h. \$0.00 \$90.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$857.00 \$911.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  Combined monthly income.   | •                      | dependent regularly receive   |                              |                        |            |            |
| 8e. Social Security  8e. \$750.00 \$750.00  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income  8g. \$0.00 \$0.00  8g. Pension or retirement income  8h. Other monthly income. Specify: 8h. + \$0.00 + \$0.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$857.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$0.00  Combined monthly income.  | (                      | divorce settlement, and property settlement.  | 8c.                          |                        |            |            |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies Specify: Food Assistance Programs Income  8g. \$0.00 \$161.00  8g. Pension or retirement income  8h. Other monthly income. Specify: 8h. + \$0.00 + \$0.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$857.00 + \$911.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$0.00  Combined monthly income.  | 8d. l                  | Unemployment compensation   | 8d.                          | \$0.00                 |            |            |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies  Specify: Food Assistance Programs Income  8g. \$0.00 \$0.00  8h. Other monthly income. Specify: 8h. + \$0.00 + \$0.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. 9. \$857.00 \$911.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$0.00  Combined monthly income.  Combined monthly income.  | 8e. <b>\$</b>          | Social Security   | 8e.                          | \$750.00               | \$750.00   |            |
| 8g. \$0.00 \$0.00 8h. Other monthly income. Specify: 8h. + \$0.00 + \$0.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$857.00 \$911.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  | li<br>c<br>u<br>h<br>S | nclude cash assistance and the value (if known) of an cash assistance that you receive, such as food stamps under the Supplemental Nutrition Assistance Program) nousing subsidies Specify: | y non-<br>s (benefits<br>or  | \$107.00               | \$161.00   |            |
| 8h. Other monthly income. Specify:  8h. + \$0.00 + \$0.00  9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  9. \$857.00 + \$911.00  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  | _                      |   |                              |                        |            |            |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income   |                        |   | _                            |                        |            |            |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income  |                        |   | ·                            |                        |            |            |
| Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> .  Specify:  11. + \$0.00  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies  Combined monthly income   |                        | •   |                              | \$857.00 +             | \$911.00 = | \$1,768.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$1,768.00  Combined monthly income  | Inclu<br>frien         | ude contributions from an unmarried partner, member ds or relatives.  | rs of your household, your   | dependents, your roomm |            |            |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income   | Spec                   | cify:   |                              |                        | 11. +      | \$0.00     |
| monthly income  |                        |   |                              |                        |            | \$1,768.00 |
| 13. Do you expect an increase or decrease within the year after you file this form?   |                        |   |                              |                        |            |            |
| No.   | 13. <b>Do</b>          | , .<br>I  | ear after you file this forn | n?                     |            |            |
|   |                        |   |                              |                        |            |            |
| Yes. Explain:   |                        | res. Explain:   |                              |                        |            |            |

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|                           | 0430 10 0420   | Do                                |   | 22 of 69   |
|---------------------------|--|-----------------------------------|---|--|
| Fill in this infor        | mation to identify your ca                                   | ase:                              |   |  |
| Case number<br>(If known) | Sheryl First Name Jesse First Name Bankruptcy Court for the: | Middle Name  Middle Name  Northem | Franklin Last Name Franklin Last Name  District of Illinois (State) | Check if this is:  An amended filing  A supplement showing post-petition chapter 13 expenses as of the following date:  MM / DD / YYYY |
|                           | e J: Your Expe   | enses                             |   | 12/15  |
| information. If           | -  |                                   |   | are equally responsible for supplying correct<br>additional pages, write your name and case number                                     |
| Part 1: Des               | cribe Your Household   | t                                 |   |  |
| 1. Is this a joi          | nt case?   |                                   |   |  |
| No. Go                    | o to line 2  |                                   |   |  |
| Yes. D                    | oes Debtor 2 live in a se                                    | parate household?                 |   |  |
|                           | <b>✓</b> No  |                                   |   |  |

| Part 2: | <b>Estimate Your Ongoing Monthly Expenses</b> |
|---------|---|

**✓** No

**✓** No

Yes

2. Do you have dependents?

Do not list Debtor 1 and

3. Do your expenses include

yourself and your dependents?

expenses of people other

Debtor 2.

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 106I.)

Yes. Fill out this information for

each dependent

| such assistance and have included it on schedule it. Tour income (Official Form B. 1001.)   |     | our expenses |
|---|-----|--------------|
| 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4. | 4.  | \$650.00     |
| If not included in line 4:  |     |              |
| 4a. Real estate taxes   | 4a  | \$0.00       |
| 4b. Property, homeowner's, or renter's insurance  | 4b. | \$0.00       |
| 4c. Home maintenance, repair, and upkeep expenses   | 4c. | \$0.00       |
| 4d. Homeowner's association or condominium dues   | 4d. | \$0.00       |

Dependent's relationship to

Debtor 1 or Debtor 2

Does dependent live

Your expenses

with you?

Dependent's

age

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 Debtor 1 Franklin
 Case number (if known)

 First Name
 Middle Name
 Last Name

| First Name Middle Name   | Last Name  |     |               |
|--|--|-----|---------------|
|  |  |     | Your expenses |
| 5. Additional mortgage payments for your residence   | , such as home equity loans                          | 5.  | \$0.00        |
| 6. Utilities:  |  |     |               |
| 6a. Electricity, heat, natural gas   |  | 6a. | \$150.00      |
| 6b. Water, sewer, garbage collection   |  | 6b. | \$0.00        |
| 6c. Telephone, cell phone, Internet, satellite, and cabl                                   | e services   | 6c. | \$125.00      |
| 6d. Other. Specify:  |  | 6d  | \$0.00        |
| 7. Food and housekeeping supplies  |  | 7.  | \$270.00      |
| 8. Childcare and children's education costs  |  | 8.  | \$0.00        |
| 9. Clothing, laundry, and dry cleaning   |  | 9.  | \$5.00        |
| 10. Personal care products and services  |  | 10. | \$5.00        |
| 11. Medical and dental expenses  |  | 11. | \$5.00        |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or to Do not include car payments | rain fare.   | 12. | \$120.00      |
| 13. Entertainment, clubs, recreation, newspapers, m  | nagazines, and books                                 | 13. | \$0.00        |
| 14. Charitable contributions and religious donations                                       |  | 14. | \$0.00        |
| 15. <b>Insurance.</b> Do not include insurance deducted from your pay or                   | included in lines 4 or 20.                           |     |               |
| 15a. Life insurance  |  | 15a | \$0.00        |
| 15b. Health insurance  |  | 15b | \$0.00        |
| 15c. Vehicle insurance   |  | 15c | \$98.00       |
| 15d. Other insurance. Specify:   |  | 15d | \$0.00        |
| 16. Taxes. Do not include taxes deducted from your pay                                     | or included in lines 4 or 20.                        |     |               |
| Specify:   |  | 16  | \$0.00        |
| 17. Installment or lease payments:   |  | 10  |               |
| 17a. Car payments for Vehicle 1  |  | 17a | \$0.00        |
| 17b. Car payments for Vehicle 2  |  | 17b | \$0.00        |
| 17c. Other. Specify:   |  | 17c | \$0.00        |
| 17d. Other. Specify:   | <del>-</del>   | 17d | \$0.00        |
| 18. Your payments of alimony, maintenance, and su  | pport that you did not report as deducted from       |     | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Offi  | cial Form 106I).                                     | 18. |               |
| 19.Other payments you make to support others who   | do not live with you.                                |     |               |
| Specify:   |  | 19. | \$0.00        |
| 20.Other real property expenses not included in line<br>20a. Mortgages on other property   | s 4 or 5 of this form or on Schedule I: Your Income. | 00  |               |
| 20b. Real estate taxes.  |  | 20a | \$0.00        |
|  |  | 20b | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  |  | 20c | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   |  | 20d | \$0.00        |
| 20e. Homeowner's association or condominium due  | 5  | 20e | \$0.00        |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 S          |  |                               | Franklin   | Case number (if known) |     |            |
|---------------------|--|-------------------------------|--|------------------------|-----|------------|
| Fi                  | irst Name  | Middle Name                   | Last Name  |                        |     |            |
| 21. <b>Other.</b> 3 | Specify:   |                               |  |                        | 21  | \$0.00     |
|                     |  |                               |  |                        |     |            |
| 22. Calcula         | ate your monthly expen                                 | ises.                         |  |                        |     | \$1,428.00 |
| 22a. Ad             | d lines 4 through 21.                                  |                               |  |                        |     | \$0.00     |
| 22b. Co             | ppy line 22 (monthly expe                              | enses for Debtor 2), if any,  | from Official Form 106J-2  |                        |     | \$1,428.00 |
| 22c. Ad             | d line 22a and 22b. The                                | result is your monthly exp    | enses.   |                        | 22. |            |
| 23.Calcula          | ite your monthly net inc                               | come.                         |  |                        |     |            |
| 23a. Co             | py line 12 (your combine                               | ed monthly income) from S     | Schedule I.  |                        | 23a | \$1,768.00 |
| 23b. Co             | ppy your monthly expense                               | es from line 22 above.        |  |                        | 23b | \$1,428.00 |
|                     | , , , ,  | nses from your monthly in     | icome.   |                        |     | \$340.00   |
| Th                  | ne result is your monthly r                            | net income.                   |  |                        | 23c |            |
| For exa             | ample, do you expect to f<br>age payment to increase o | finish paying for your car le | ses within the year after oan within the year or do y nodification to the terms of | ou expect your         |     |            |

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| Fill in this infor  | mation to identify your c | ase:        |                              |
|---------------------|---------------------------|-------------|------------------------------|
| Debtor 1            | Sheryl                    |             | Franklin                     |
|                     | First Name                | Middle Name | Last Name                    |
| Debtor 2            | Jesse                     |             | Franklin                     |
| (Spouse, if filing) | First Name                | Middle Name | Last Name                    |
| United States E     | Bankruptcy Court for the: | Northern    | District of Illinois (State) |
| Case number         |                           |             | (2.5)                        |

#### Official Form 106Dec

| Check if this is an |
|---------------------|
| amended filing      |

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |               |  |  |
|-----|--|---------------|--|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                    | nelp you fill | I out bankruptcy forms?  |  |
|     | ✓ No   |               |  |  |
|     | Yes. Name of person  |               | ankruptcy Petition Preparer's Notice, Declaration, and<br>o (Official Form 119). |  |
|     |  |               |  |  |
|     |  |               |  |  |
|     | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedu    | ules filed with this declaration and   |  |
|     | ·  |               |  |  |
| X   | /s/ Sheryl Franklin  | ×             | /s/ Jesse Franklin   |  |
|     | Signature of Debtor 1  |               | Signature of Debtor 2  |  |
|     | Date 2/16/2018   |               | Date 2/16/2018   |  |
|     | MM/DD/YYYY   |               | MM/DD/YYYY   |  |

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| Fill in this in               | formation to identify your o   | , , , , , , , , , , , , , , , , , , , |  |   |                           |          |  |
|-------------------------------|--|---------------------------------------|--|---|---------------------------|----------|--|
| Debtor 1                      | Sheryl   |                                       | Franklin   |   |                           |          |  |
|                               | First Name   | Middle Na                             |  | е   |                           |          |  |
| Debtor 2<br>Spouse, if filing | Jesse<br>First Name  | Middle Na                             | Franklin<br>ame Last Nam                                       |   |                           |          |  |
|                               | T HOT HAITE  |                                       | arre Last Nam  | е   |                           |          |  |
| Jnited State                  | s Bankruptcy Court for the:  | Northern                              | District of Illino   |   |                           |          |  |
| Case numbe<br>If known)       | er   |                                       | (State   | e)<br>  |                           |          |  |
| Officia                       | l Form 107   |                                       |  |   | <u> </u>                  |          | Check if this amended filing                       |
| Statem                        | ent of Financia  | al Affairs fo                         | r Individuals  | Filing for                                      | Bankru                    | uptcy    | 0  |
| nformation<br>umber (if I     | olete and accurate as po<br>n. If more space is need<br>known). Answer every q<br>ive Details About Your     | ed, attach a separ<br>uestion.        | ate sheet to this form.  | . On the top of                                 |                           |          |  |
|                               |  |                                       |  |   |                           |          |  |
| . What                        | is your current marital st   | atus?                                 |  |   |                           |          |  |
|                               | -  | atus?                                 |  |   |                           |          |  |
| ✓ N                           | Married  | atus?                                 |  |   |                           |          |  |
| ✓ N                           | -  | atus?                                 |  |   |                           |          |  |
| ✓ N                           | Married<br>Not married   |                                       | other than where you live                                      | re now?   |                           |          |  |
| ✓ N                           | Married  |                                       | other than where you liv                                       | ve now?   |                           |          |  |
| Durin                         | Married<br>Not married<br>g the last 3 years, have yo  | ou lived anywhere o                   |  |   |                           |          |  |
| ☑ N<br>□ N<br>2. Durin<br>☑ N | Married<br>lot married<br>g the last 3 years, have ye  | ou lived anywhere o                   |  |   | ow.                       |          |  |
| Durin                         | Married<br>Not married<br>g the last 3 years, have yo  | ou lived anywhere o                   |  |   | ow.                       |          |  |
| 2. Durin                      | Married<br>Not married<br>g the last 3 years, have yo  | ou lived anywhere o                   |  |   | ow.                       |          | Dates Debtor 2 lived there                         |
| 2. Durin                      | Married Not married  g the last 3 years, have you No Yes. List all of the places yo                          | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived                | vhere you live n                                |                           |          |  |
| Durin                         | Married Not married  g the last 3 years, have you No Yes. List all of the places yo                          | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived                | vhere you live no                               |                           |          | there  |
| 2. Durin                      | Married Not married  g the last 3 years, have you No Yes. List all of the places you Debtor 1:               | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived                | Debtor 2:                                       | Debtor 1                  |          | there  |
| Durin                         | Married Not married  g the last 3 years, have you No Yes. List all of the places yo                          | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | vhere you live no                               | Debtor 1                  |          | Same as Debtor 1                                   |
| Durin                         | Married Not married  g the last 3 years, have you No Yes. List all of the places you Debtor 1:               | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:                                       | Debtor 1                  |          | Same as Debtor 1                                   |
| Durin  Y                      | Married Not married  g the last 3 years, have years No Yes. List all of the places years Debtor 1:           | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as  Number Street               | Debtor 1                  | 7in Codo | Same as Debtor 1                                   |
| Durin  Y                      | Married Not married  g the last 3 years, have you No Yes. List all of the places you Debtor 1:               | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as  Number Stree                | Debtor 1 et State         | Zip Code | Same as Debtor 1  From To                          |
| Durin  Y                      | Married Not married  g the last 3 years, have years No Yes. List all of the places years Debtor 1:           | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as  Number Street               | Debtor 1 et State         | Zip Code | Same as Debtor 1                                   |
| Durin                         | Married Not married  g the last 3 years, have years. List all of the places years.  Debtor 1:  Jumber Street | ou lived anywhere o                   | Dates Debtor 1 lived there  From To                            | Debtor 2:  Same as  Number Stree  City  Same as | Debtor 1  State  Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1 |
| Durin  Y  Y                   | Married Not married  g the last 3 years, have years No Yes. List all of the places years Debtor 1:           | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there          | Debtor 2:  Same as  Number Stree                | Debtor 1  State  Debtor 1 | Zip Code | Same as Debtor 1  From To                          |
| P. Durin                      | Married Not married  g the last 3 years, have years. List all of the places years.  Debtor 1:  Jumber Street | ou lived anywhere o                   | Dates Debtor 1 lived there  From To                            | Debtor 2:  Same as  Number Stree  City  Same as | Debtor 1  State  Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1 |
| P. Durin                      | Married Not married  g the last 3 years, have years. List all of the places years.  Debtor 1:  Jumber Street | ou lived anywhere o                   | B years. Do not include v  Dates Debtor 1 lived there  From To | Debtor 2:  Same as  Number Stree  City  Same as | Debtor 1  State  Debtor 1 | Zip Code | there  Same as Debtor 1  From To  Same as Debtor 1 |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Franklin

| Debt        | or 1                  | Sheryl  | Franklir  | Case n   | umber (if known)                                       |  |
|-------------|-----------------------|---|---|--|--|--|
|             |                       | First Name Middle   | e Name Last Nar   | ne   | •  |  |
| Part        | 2:                    | <b>Explain the Sources of Your Inc</b>  | come  |  |  |  |
|             | Fill i                | you have any income from employm n the total amount of income you receivities. If you are filing a joint case and yo No Yes. Fill in the details.   | ved from all jobs and all busi  | nesses, including part-time  |  | ears?  |
|             |                       |   | Debtor 1  |  | Debtor 2   |  |
|             |                       |   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)                                      | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)            |
|             |                       | om January 1 of current year until<br>e date you filed for bankruptcy:  | Wages, commissions, bonuses, tips Operating a business                                    |  | Wages, commissions, bonuses, tips Operating a business |  |
|             |                       | or last calendar year: anuary 1 to December 31, 2017 ) YYYY   | Wages, commissions, bonuses, tips Operating a business                                    |  | Wages, commissions, bonuses, tips Operating a business |  |
|             |                       | or the calendar year before that:<br>anuary 1 to December 31, 2016 )<br>YYYY  | Wages, commissions, bonuses, tips Operating a business                                    |  | Wages, commissions, bonuses, tips Operating a business |  |
| l<br>F<br>f | nclu<br>oubl<br>iling | you receive any other income during ide income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details. | ncome is taxable. Examples of come; interest; dividends; m you received together, list it | of other income are alimony;<br>oney collected from lawsuits;<br>only once under Debtor 1. | royalties; and gambling and lo                         |  |
|             |                       |   | Debtor 1  |  | Debtor 2   |  |
|             |                       |   | Sources of income<br>Describe below.  | Gross income from each source (before deductions and exclusions)                           | Sources of income<br>Describe below.                   | Gross income from each source (before deductions and exclusions) |
|             |                       |   | Est SSI   | \$3,000.00   |  |  |
|             |                       | rom January 1 of current year until<br>ne date you filed for bankruptcy:  | Est LINK  | \$530.00   |  |  |
|             |                       |   | Est SSI   | \$18,000.00  |  |  |
|             |                       | or last calendar year:<br>January 1 to December 31, 2017 )  | Est LINK  | \$3,200.00   |  |  |
|             | (0                    | YYYY  |   |  |  |  |
|             | _                     |   | Est SSI   | \$18,000.00  |  |  |
|             |                       | or the calendar year before that:<br>lanuary 1 to December 31, 2016 )<br>YYYY   | Est LINK  | \$3,200.00   |  |  |
|             |                       |   |   |  |  |  |

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Franklin Debtor 1 Sheryl \_ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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| or 1 Sheryl  |   | Frai                                  | nklin  | Case number                                 | (if known)   |
|--|---|---------------------------------------|--|---|--|
| First Name   | Middle Name   | Last                                  | Name   |   |  |
|  | ves; any general partners<br>are an officer, director, p<br>business you operate as | ; relatives of any gerson in control, | general partners; part<br>or owner of 20% or | nerships of which y<br>more of their voting |  |
| <ul><li>✓ No</li><li>✓ Yes. List all payment</li></ul> | ts to an insider.   |                                       |  |   |  |
|  |   | Dates of payment                      | Total amount paid                            | Amount you still owe                        | Reason for this payment  |
| Insider's Name   |   |                                       |  |   |  |
| Number Street  |   |                                       |  |   |  |
| City State   | e Zip Code  |                                       |  |   |  |
| Insider's Name   |   |                                       |  |   |  |
| Number Street  |   |                                       |  |   |  |
| City State   | e Zip Code  |                                       |  |   |  |
| insider? Include payments on debte                     |   | d by an insider.                      | Total amount paid                            | Amount you<br>still owe                     | n account of a debt that benefited an  Reason for this payment |
|  |   |                                       |  |   | Include creditor's name  |
| Insider's Name   |   |                                       |  |   |  |
| Number Street  |   |                                       |  |   |  |
| City State   | e Zip Code  |                                       |  |   |  |
| Insider's Name   |   |                                       |  |   |  |
| Number Street  |   |                                       |  |   |  |
| City State   | e Zip Code  |                                       |  |   |  |
| City State   | e ZID Code  |                                       |  |   | I I  |

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Debtor 1 Sheryl Franklin Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Sheryl   | Franklin                    | Case number (if known)                        |                       |
|------|--|-----------------------------|---|-----------------------|
|      | First Name Middle Name   | Last Name                   |   |                       |
| 11.  | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you |                             | pank or financial institution, set off any am | ounts from your       |
|      | Yes. Fill in the details.  |                             |   |                       |
|      | Too. This is docume.   | Describe the action th      | e creditor took Date action was taken         | Amount                |
|      | Creditor's Name  |                             |   |                       |
|      | Number Street  |                             |   |                       |
|      |  | Last 4 digits of account    | number: XXXX-                                 |                       |
|      | City State Zip Code  |                             |   |                       |
| 12.  | Within 1 year before you filed for bankruptcy, was an  | ny of your property in the  | possession of an assignee for the benefit o   | f creditors, a court- |
|      | appointed receiver, a custodian, or another official?  |                             |   | ŕ                     |
|      | ✓ No ✓ Yes   |                             |   |                       |
| Part | 5: List Certain Gifts and Contributions  |                             |   |                       |
| 13.  | Within 2 years before you filed for bankruptcy, did y  | you give any gifts with a t | otal value of more than \$600 per person?     |                       |
| 13.  | No   | ou give any gifts with a t  | otal value of more than \$000 per person:     |                       |
|      | Yes. Fill in the details for each gift.  |                             |   |                       |
|      | Gifts with a total value of more than \$600 per person   | Describe the gifts          | Dates you<br>gave the<br>gifts                | Value                 |
|      |  |                             |   |                       |
|      | Person to Whom You Gave the Gift   |                             |   | -                     |
|      | Number Street  |                             |   |                       |
|      | City State Zip Code  |                             |   |                       |
|      | Person's relationship to you   |                             |   |                       |
|      | Person to Whom You Gave the Gift   |                             |   | _                     |
|      |  |                             |   |                       |
|      | Number Street  |                             |   |                       |
|      | City State Zip Code  |                             |   |                       |
|      | Person's relationship to you   |                             |   |                       |

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| ebtor 1 | Sheryl   |   | Franklin   | Case number (if know        | wn)                               |                        |
|---------|--|---|--|-----------------------------|-----------------------------------|------------------------|
|         | First Name Middle I  | Name  | Last Name  | <u> </u>                    |                                   |                        |
|         |  |   |  |                             |                                   |                        |
| . Wi    | thin 2 years before you filed for bankr  | ruptcy, did you   | u give any gifts or contribu   | tions with a total value    | of more than \$600                | to any charity?        |
|         | 1 No   |   |  |                             |                                   |                        |
| ✓       | No   |   |  |                             |                                   |                        |
|         | Yes. Fill in the details for each gift or  | contribution.   |  |                             |                                   |                        |
|         | Gifts or contributions to charities  |   | Describe what you contr  | hutad                       | Date you                          | Value                  |
|         | that total more than \$600   |   | Describe what you conti  | buteu                       | contributed                       | Value                  |
|         | that total more than \$000   |   |  |                             | Contributed                       |                        |
|         |  |   |  |                             |                                   |                        |
|         | Charity's Name   |   |  |                             |                                   |                        |
|         |  |   |  |                             |                                   |                        |
|         |  |   |  |                             |                                   |                        |
|         | Number Street  |   |  |                             |                                   |                        |
|         | Number dieet   |   |  |                             |                                   |                        |
|         | City State Zip   | Code  |  |                             |                                   |                        |
|         | Oity State Zip   | Oode  |  |                             |                                   |                        |
| c.      | List Certain Losses  |   |  |                             |                                   |                        |
| . 0.    |  |   |  |                             |                                   |                        |
|         | No Yes. Fill in the details.  Describe the property you lost and how the loss occurred   |   | Describe any insurance Include the amount that in                            | surance has paid. List      | Date of your loss                 | Value of property lost |
|         |  |   | pending insurance claims A/B: Property.                                      | on line 33 of Schedule      |                                   |                        |
|         |  |   | A.B. Floperty.   |                             |                                   |                        |
|         |  |   |  |                             |                                   |                        |
|         | 1  | _   |  |                             |                                   |                        |
| CU/H    | List Certain Payments or Transf  |   |  |                             |                                   |                        |
| . Wit   | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a   | ıptcy, did you<br>a bankruptcy                                    | petition?  |                             |                                   | anyone you consulte    |
| . Wit   | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>clude any attorneys, bankruptcy petition p   | ıptcy, did you<br>a bankruptcy                                    | petition?  |                             |                                   | anyone you consulte    |
| . Wit   | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>lude any attorneys, bankruptcy petition p  | ıptcy, did you<br>a bankruptcy                                    | petition?  |                             |                                   | anyone you consulte    |
| Wit     | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>clude any attorneys, bankruptcy petition p   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of             | services required in your b | pankruptcy.  Date payment         | Amount of              |
| Wit     | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>clude any attorneys, bankruptcy petition p   | ıptcy, did you<br>a bankruptcy                                    | petition?<br>edit counseling agencies for                                    | services required in your b | Date payment or transfer          |                        |
| Wit     | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>clude any attorneys, bankruptcy petition p   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of             | services required in your b | pankruptcy.  Date payment         | Amount of              |
| Wit     | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>clude any attorneys, bankruptcy petition p   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of             | services required in your b | Date payment or transfer          | Amount of              |
| Wit     | thin 1 year before you filed for bankru<br>out seeking bankruptcy or preparing a<br>lude any attorneys, bankruptcy petition p<br>No<br>Yes. Fill in the details.   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition posterior No Yes. Fill in the details.  Semrad Law Firm   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible. No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue  | ıptcy, did you<br>a bankruptcy                                    | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600  | iptcy, did you<br>a bankruptcy<br>oreparers, or cr                | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600  | iptcy, did you<br>a bankruptcy<br>oreparers, or cr                | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip   | iptcy, did you<br>a bankruptcy<br>oreparers, or cr                | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600  | iptcy, did you<br>a bankruptcy<br>oreparers, or cr                | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| . Wit   | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6000 City State Zip  Email or website address  Person Who Made the Payment, if Not   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| . Wit   | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 6000 City State Zip  Email or website address  Person Who Made the Payment, if Not   | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| . Wit   | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible of the property of the propert | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| . Wit   | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition possible of the property of the propert | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition pour No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address  Person Who Made the Payment, if Not Person Who Was Paid  Number Street  | ptcy, did you a bankruptcy preparers, or creparers.               | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition pour No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address  Person Who Made the Payment, if Not Person Who Was Paid  Number Street  | ptcy, did you<br>a bankruptcy<br>preparers, or cre<br>643<br>Code | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| Wit     | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition properties.  No Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address  Person Who Made the Payment, if Not Person Who Was Paid  Number Street  City State Zip   | ptcy, did you a bankruptcy preparers, or creparers.               | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |
| . Wit   | thin 1 year before you filed for bankru out seeking bankruptcy or preparing a clude any attorneys, bankruptcy petition pour No  Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois 600 City State Zip  Email or website address  Person Who Made the Payment, if Not Person Who Was Paid  Number Street  | ptcy, did you a bankruptcy preparers, or creparers.               | petition? edit counseling agencies for  Description and value of transferred | services required in your b | Date payment or transfer was made | Amount of payment      |

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| Debtor   |                  |  |                                 | Franklin                               | Case r        | number <i>(if known)</i>             |                                    |         |                              |
|----------|------------------|--|---------------------------------|--|---------------|--------------------------------------|------------------------------------|---------|------------------------------|
|          |                  | First Name Middle Name   | )                               | Last Name                              |               |                                      |                                    |         |                              |
| h        | elp              | hin 1 year before you filed for bankrupto<br>o you deal with your creditors or to make<br>not include any payment or transfer that you | paymen                          | its to your creditors?                 | your behalf p | oay or transfer                      | any property to a                  | anyone  | who promised to              |
| [<br>[   | <b>✓</b>         | No<br>Yes. Fill in the details.  |                                 |  |               |                                      |                                    |         |                              |
|          |                  |  |                                 | Description and value of transferred   | any propert   | y                                    | Date payment or transfer was made  | Amo     | unt of payment               |
|          |                  | Person Who Was Paid  |                                 |  |               |                                      |                                    |         |                              |
|          |                  | Number Street  |                                 |  |               |                                      |                                    |         |                              |
|          |                  | City State Zip Coc   | le                              |  |               |                                      |                                    |         |                              |
| 18. V    | Vi+k             | hin 2 years before you filed for bankrupto   |                                 | u sall trade or otherwise              | transfor any  | property to an                       | wone other than                    | nrono   | rty transforred in           |
| ti<br>Ir | <b>he</b><br>ոշև | ordinary course of your business or final ude both outright transfers and transfers ma transfers that you have already listed on this  | n <b>cial affa</b><br>de as sec | irs?<br>curity (such as the granting o |               |                                      |                                    |         | -                            |
| Ŀ        | <b>/</b>         | No   |                                 |  |               |                                      |                                    |         |                              |
|          |                  | Yes. Fill in the details.  |                                 |  |               |                                      |                                    |         |                              |
|          |                  |  |                                 | Description and value of transferred   | property      | Describe any payments re in exchange | y property or<br>ceived or debts p | paid    | Date<br>transfer was<br>made |
|          |                  | Person Who Received Transfer   |                                 |  |               |                                      |                                    |         |                              |
|          |                  | Number Street  |                                 |  |               |                                      |                                    |         |                              |
|          |                  | City State Zip Coo<br>Person's relationship to you   | le                              |  |               |                                      |                                    |         |                              |
|          |                  | Person Who Received Transfer   |                                 |  |               |                                      |                                    |         |                              |
|          |                  | Number Street  |                                 |  |               |                                      |                                    |         |                              |
|          |                  | City State Zip Coo<br>Person's relationship to you   | le                              |  |               |                                      |                                    |         |                              |
| b        | en               | hin 10 years before you filed for bankrup<br>eficiary?<br>ese are often called asset-protection devices                                |                                 | ou transfer any property to            | a self-settle | ed trust or sim                      | ilar device of wh                  | ich you | are a                        |
| [        | <b>Z</b>         | No<br>Yes. Fill in the details.  |                                 |  |               |                                      |                                    |         |                              |
| L        | _                | . So. I in it alo dottalo.   |                                 | Description and value of               | f the proper  | ty transferred                       |                                    |         | Date<br>transfer was<br>made |
|          |                  | Name of trust  |                                 |  |               |                                      |                                    |         |                              |

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Franklin Debtor 1 Sheryl Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt |      | Sheryl  |   |  | Franklin   | Case   | number (if) | known)                               |            |                      |
|------|------|---|---|--|--|--|-------------|--------------------------------------|------------|----------------------|
|      |      | First Name  | Middle Nam  | e  | Last Name  |  |             |                                      |            |                      |
| 26.  | _    |   | in any judicial or adr  | ninistrative   | e proceeding under   | any environment                                      | al law? Inc | clude settlements a                  | and order  | s.                   |
|      |      | No<br>Yes. Fill in the det  | ails.   |  |  |  |             |                                      |            |                      |
|      |      | O 4:41-   |   | Cour   | rt or agency   |  | Nature o    | f the case                           |            | Status of the case   |
|      |      | Case title  |   | Cour   | rt Name  |  |             |                                      |            | Pending              |
|      |      | Case number   |   | Num  | berStreet  |  |             |                                      |            | On appeal  Concluded |
|      |      | _   |   | City   | State  | Zip Code   |             |                                      |            | Considuca            |
| Part | 11:  | Give Details Ab   | out Your Business   | or Conne   | ections to Any Bu  | siness   |             |                                      |            |                      |
| 27.  | With | A sole proprie A member of A partner in a An officer, dir An owner of a | etor or self-employed<br>a limited liability comp<br>a partnership<br>rector, or managing ex<br>at least 5% of the votir<br>bove applies. Go to P | in a trade, pany (LLC) executive of ang or equity lart 12. | profession, or other<br>or limited liability pa<br>a corporation<br>y securities of a corp | activity, either ful<br>ertnership (LLP)<br>poration |             | -                                    | ousiness?  |                      |
|      |      |   |   |  | Describe the natu  |  | s           | Employer Identificinclude Social Se  |            |                      |
|      |      | Business Name   |   |  |  |  |             | EIN:  Dates business ex              | لد و فواند |                      |
|      |      | Number Street  City   | State Zip Co  | udo.   | Name of account  | ant or bookkeepe                                     | r           |                                      |            |                      |
|      |      | Oily  | 2 p 00  | de   |  |  |             | From1                                |            |                      |
|      |      |   |   |  | Describe the natu  | re of the busines                                    | s           | Employer Identific include Social Se |            |                      |
|      |      | Business Name   |   |  |  |  |             | EIN:                                 |            |                      |
|      |      | Number Street   |   |  | Name of account  | ant or bookkeepe                                     | r           | Dates business ex                    | xisted     |                      |
|      |      | City  | State Zip Co  | de   |  |  |             | From1                                | Го         |                      |
|      |      |   |   |  | Describe the natu  | re of the busines                                    | s           | Employer Identificinclude Social Se  |            |                      |
|      |      | Business Name   |   |  |  |  |             | EIN:                                 |            |                      |
|      |      | Number Street   |   |  | Name of account  | ant or bookkeepe                                     | r           | Dates business ex                    | xisted     |                      |
|      |      | City  | State Zip Co  | ode  |  |  |             | From1                                | Го         |                      |
|      |      |   |   |  |  |  |             |                                      |            |                      |

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| Deb  | tor 1 Sheryl                |  |                          | Franklin                      | Case number (if known)   |
|------|-----------------------------|--|--------------------------|-------------------------------|--|
|      | First Nan                   | ie                                       | Middle Name              | Last Name                     |  |
| 28.  |                             | ars before you file<br>or other parties. | d for bankruptcy, did yo | ou give a financial stateme   | nt to anyone about your business? Include all financial institutions,  |
|      | Yes. F                      | ll in the details bel                    | OW.                      |                               |  |
|      | _                           |  |                          | Date issued                   |  |
|      |                             |  |                          | MM/DD/YYYY                    |  |
|      | Name                        |  |                          | MIM/DD/YYYY                   |  |
|      | Numb                        | er Street                                |                          | _                             |  |
|      |                             |  |                          | _                             |  |
|      | City                        | State                                    | Zip Code                 |                               |  |
| Part | 12: Sign                    | Below                                    |                          |                               |  |
| t    | true and cor<br>a bankrupto | rect. I understand                       | that making a false sta  | tement, concealing prope      | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |                             | /s/ Sheryl F                             |                          |                               | /s/ Jesse Franklin   |
|      |                             | Signature of D                           | ebtor 1                  |                               | Signature of Debtor 2  |
|      |                             | Date 2/16/20                             | 18                       |                               | Date 2/16/2018   |
| ı    | Did you atta                | ch additional page                       | es to Your Statement of  | Financial Affairs for Indivi  | duals Filing for Bankruptcy (Official Form 107)?   |
| [    | <b>✓</b> No                 |  |                          |                               |  |
|      | Yes                         |  |                          |                               |  |
| ı    | Did you pay                 | or agree to pay so                       | meone who is not an at   | torney to help you fill out I | pankruptcy forms?  |
|      | <b>✓</b> No                 |  |                          |                               |  |
| i    | Yes. Nar                    | ne of person                             |                          |                               | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).   |

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

|       |  | Nortr              | ern District of Illinois         |                    |                                 |
|-------|--|--------------------|----------------------------------|--------------------|---------------------------------|
| In re | Sheryl Franklin ; Jesse Fran   | ıklin              |                                  | Case No.           |                                 |
| _     | Debtor   |                    | <del>-</del>                     |                    | (If known)                      |
|       |  |                    |                                  | Chapter            | Chapter 13                      |
|       | DISCLOSURE OF  | COMPEN             | SATION OF ATT                    | ORNEY F            | OR DEBTOR                       |
| 1     | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the    | filing of the petition in bankru | otcy, or agreed to | be paid to me, for services     |
|       | For legal services, I have agreed to ac  | cept               |                                  |                    | \$4,000.00                      |
|       | Prior to the filing of this statement I h  | nave received      |                                  |                    | \$400.00                        |
|       | Balance Due  |                    |                                  |                    | \$3,600.00                      |
| 2     | . The source of the compensation paid  | I to me was:       |                                  |                    |                                 |
|       | <b>J</b> Debtor  | Ot                 | ner (specify)                    |                    |                                 |
| 3     | . The source of the compensation paid  | I to me is:        |                                  |                    |                                 |
|       | <b>✓</b> Debtor  | Ot                 | ner (specify)                    |                    |                                 |
| 4     | I have not agreed to share the abmembers and associates of my la   |                    | ompensation with any other p     | erson unless the   | y are                           |
|       | I have agreed to share the above members or associates of my law the people sharing in the compet              | firm. A copy of    | the agreement, together with     |                    |                                 |
| 5     | . In return for the above-disclosed fee,   | I have agreed to   | render legal service for all as  | pects of the bank  | ruptcy case, including:         |
|       | <ul> <li>a. Analysis of the debtor's finan<br/>bankruptcy;</li> </ul>  | cial situation, ar | nd rendering advice to the deb   | tor in determinin  | g whether to file a petition in |
|       | b. Preparation and filing of any   | oetition, schedu   | les, statements of affairs and p | olan which may b   | pe required;                    |
|       | c. Representation of the debtor  | at the meeting o   | f creditors and confirmation h   | earing, and any a  | adjourned hearings thereof;     |
|       | d. Representation of the debtor  | in adversary pro   | ceedings and other contested     | bankruptcy mat     | ters;                           |
| 6     | . By agreement with the debtor(s), the   | above-disclosed    | I fee does not include the follo | wing services:     |                                 |
|       |  |                    |                                  |                    |                                 |
|       |  |                    |                                  |                    |                                 |
|       |  |                    | CERTIFICATION                    |                    |                                 |
|       | certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.                                 | e statement of a   | ny agreement or arrangement      | for payment to n   | ne for representation of the    |
|       | 2/16/2018  |                    | /s/ Brittne                      | ey Mansfield       |                                 |
|       | Date   |                    | Signature                        | of Attorney        |                                 |
|       |  |                    | Samrad                           | Law Firm           |                                 |
|       |  |                    |                                  | of law firm        |                                 |
|       |  |                    |                                  |                    |                                 |

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$407.00
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$97.00 for expenses, leaving a balance due of \$4,007.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: 2/16/2018     |                        |
|---------------------|------------------------|
| Signed:             |                        |
| /s/ Sheryl Franklin |                        |
| /s/ Jesse Franklin  | /s/ Brittney Mansfield |
| Debtor(s)           | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$275 | total fee          |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$200 | filing fee         |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

Northern District of Illinois

| In re:        | Franklin, Sheryl ; Franklin, Jesse               | Case No                                  |                                  |
|---------------|--|--|----------------------------------|
|               | Debtor(s)  | Odde IVo.                                |                                  |
|               |  | Chapter.                                 | Chapter13                        |
|               | VERIFICATION                                     | N OF CREDITOR MATRI                      | X                                |
| T<br>knowledg | he above named Debtors hereby verify that the e. | attached list of creditors is true       | and correct to the best of their |
| Date:         | 2/16/2018  | /s/ Franklin, Sheryl                     |                                  |
|               |  | Franklin, Sheryl<br>Signature of Debtor  |                                  |
|               |  | /s/ Franklin, Jesse                      |                                  |
|               |  | Franklin, Jesse<br>Signature of Joint De | ebtor                            |

GATEWAY 1 160 N. Riverview Drive, Suite 100 Corona, CA, 92880

ACCEPTANCE NOW 6288 Dawson Blvd Norcross, GA, 30093

PORTFOLIO RC 120 Corporate Boulevard Norfolk, VA, 23502

AFNI, INC. PO Box 3517 Bloomington, IL, 61702

DPT TREASURY P O BOX 2451 BIRMINGHAM, AL, 35201

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Value City 49 W North Ave Northlake, IL, 60164

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$407.00
- 3. Before signing this agreement, the attorney has received, \$400.00 toward the flat fee, leaving a balance due of \$3,600.00; and \$97.00 for expenses, leaving a balance due of \$4,007.00
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:     | 2/13/2018              |  |
|-----------|------------------------|--|
| Signed:   | 1                      |  |
| /s/ Shery | I Franklin Shill Spull |  |
| /s/ Jesse | Franklin Jesse Frenken | /s/ Brittney Mansfield Butthey Many July |
| Debtor(s  | )                      | Attorney for Debtor(s)                   |

Do not sign if the fee amounts at top of this page are blank.

Local Bankruptcy Form 23c

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| Debtor 1 Sheryl<br>First Name   | Frank<br>Middle Name Last N  |   | number (if known)  | _ |  |
|---|--|---|--|---|--|
| Part 6: Answer These Que  | estions for Reporting Purposes   |   |  |   |  |
| 16. What kind of debts do<br>you have?  | "incurred by an individual pring No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily bus   | marily for a personal, famil<br>siness debts? <i>Business de</i><br>stment or through the ope | debts are debts that you incurred to obtain eration of the business or investment. |   |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund:   | Do you estimate that after any  | y exempt property is excluded and administrative te to unsecured creditors?        |   |  |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,000  | 25,001-50,000<br>50,001-100,000<br>More than 100,000                               |   |  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$100 \$100,000,001-\$50                  | million \$1,000,000,001-\$10 billion  D million \$10,000,000,001-\$50 billion      |   |  |
| 20. How much do you estimate your liabilities to be?  |  | \$1,000,001-\$10 m \$10,000,001-\$50 m \$50,000,001-\$50 \$100,000,001-\$50                   | million \$1,000,000,001-\$10 billion  D million \$10,000,000,001-\$50 billion      |   |  |
| Part 7: Sign Below  | I have examined this petition, and I   | declare under penalty of  | periury that the information provided is true and                                  | d |  |
| For you   | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill |   |  |   |  |
|   | out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.   |   |  |   |  |
|   | I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.   |   |  |   |  |
|   | /s/ Sheryl Franklin / Signature of Debtor 1  | •   | /s/ Jesse Franklin White Tank J. Signature of Debtor 2                             |   |  |
|   | Executed on 2/13/2018<br>MM / DD / Y   | YYY   | Executed on 2/13/2018 MM / DD / YYYY   |   |  |

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| Fill in this information to identify your case: |            |             |                              |  |  |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1  | Sheryl     | Franklin    |                              |  |  |
|   | First Name | Middle Name | Last Name                    |  |  |
| Debtor 2  | Jesse      |             | Franklin                     |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                    |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois (State) |  |  |
| Case number<br>(If known)                       |            | 9           | (Giate)                      |  |  |

### Official Form 106Dec

Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1: Sign Below  |   |  |  |  |  |
|---|---|--|--|--|--|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |
| <b>☑</b> No   |   |  |  |  |  |
| Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
| Under penalty of perjury, I declare that I have read the summa                                    | ary and schedules filed with this declaration and   |  |  |  |  |
| that they are true and correct.   | $\sim$ $\circ$  |  |  |  |  |
| Signature of Debtor 1   | Signature of Debtor 2   |  |  |  |  |
| · ·   |   |  |  |  |  |
| Date 2/13/2018<br>MM/DD/YYYY  | Date 2/13/2018<br>MM/DD/YYYY  |  |  |  |  |

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| Debtor '                               |   |                                    |                   | Franklin                  | Case number (if known)   |
|--|---|------------------------------------|-------------------|---------------------------|--|
| 00000000000000000000000000000000000000 | First Name  | Mi                                 | ddle Name         | Last Name                 |  |
|  | ithin 2 years before<br>editors, or other par<br>No<br>Yes. Fill in the det | ties.                              | nkruptcy, did yo  | ou give a financial stat  | ement to anyone about your business? Include all financial institutions,   |
|  | -   |                                    |                   | Date issued               |  |
|  |   |                                    |                   |                           |  |
|  | Name  |                                    |                   | MM/DD/YYYY                | <del></del>  |
|  | Number Street   |                                    |                   | _                         |  |
|  | Number Street   |                                    |                   |                           |  |
|  | City  | State                              | Zip Code          | _                         |  |
|  | <b>1</b> 0: D.I.  |                                    |                   |                           |  |
| Part 12                                | Sign Below  |                                    |                   |                           |  |
| true                                   | and correct. I unde   | rstand that m                      | aking a false sta | tement, concealing p      | chments, and I declare under penalty of perjury that the answers are roperty, or obtaining money or property by fraud in connection with p to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|  |   | Sheryl Franklin<br>ure of Debtor 1 | Shylota           | h                         | /s/ Jesse Franklin   |
|  | Date 2  | 2/13/2018                          |                   |                           | Date 2/13/2018   |
| Did                                    | you attach addition   | al pages to Yo                     | our Statement of  | f Financial Affairs for I | ndividuals Filing for Bankruptcy (Official Form 107)?  |
| [7]                                    | No  |                                    |                   |                           |  |
|  | Yes   |                                    |                   |                           |  |
| Did                                    | you pay or agree to   | pay someone                        | who is not an a   | ttorney to help you fill  | out bankruptcy forms?  |
| V                                      | No  |                                    |                   |                           |  |
|  | Yes. Name of person   | 1                                  |                   |                           | Attach the Bankruptcy Petition Preparer's Notice,  |

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:  | Franklin, Sheryl ; Franklin, Jesse  Debtor(s)      | Case No  |                                      |
|---------|--|--|--------------------------------------|
|         |  | Chapter.   | Chapter13                            |
|         | VERIFICATIO  | N OF CREDITOR MA   | TRIX                                 |
| knowled | The above named Debtors hereby verify that the ge. | e attached list of creditors is t                        | rue and correct to the best of their |
| Date:   | 2/13/2018  | /s/ Franklin, She<br>Franklin, Sheryl<br>Signature of De | ,                                    |
|         |  | /s/ Franklin, Jes<br>Franklin, Jesse<br>Signature of Jo  | sse Jesse Into                       |

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| Debto |          | Sheryl<br>First Name  | Middle Name                     | Franklin<br>Last Name   | Case number (fknown)   |             |
|-------|----------|---|---------------------------------|-------------------------|--|-------------|
| 16.   | Cal      | culate the median family                                      | income that applies to ve       | ou. Follow these ster   | os:  |             |
|       |          | a. Fill in the state in which yo                              | 200 20                          | Illinois                |  |             |
|       | 16b      | o. Fill in the number of peop                                 | le in your household.           | 2                       | _  |             |
|       | 160      | c. Fill in the median family in household                     | • 9                             | To fi                   | nd a list of applicable median income amounts, go online<br>may also be available at the bankruptcy clerk's office.  | \$67,254.00 |
| 17,   | Hov      | w do the lines compare?                                       | the separate manuchons to       | i una ionni. Triia iiat | may also be available at the bankingtey clerk's office.  |             |
|       |          | Line 15b is less than   |                                 |                         | is form, check box 1, <i>Disposable income is not determined attion of Disposable Income</i> (Official Form 122C-2). |             |
|       | 17b      | U.S.C. § 1325(b)(3).  |                                 | Calculation of Disp     | neck box 2, <i>Disposable income is determined under 11</i> osable Income (Official Form 122C-2). On line 39 of that |             |
| Part  | 3:       | Calculate Your Comm   | itment Period Under             | 11 U.S.C. §1325(        | (b)(4)   |             |
| 18.   | Cop      | oy your total average mon                                     | thly income from line 11.       |                         |  | \$268.00    |
| 19.   |          |   |                                 |                         | e is not filing with you, and you contend that calculating the f your spouse's income, copy the amount from line 13. |             |
|       | 19a      | a. If the marital adjustment of                               | loes not apply, fill in 0 on li | ne 19a.                 |  | -\$0.00     |
|       |          | o. Subtract line 19a from I                                   |                                 |                         |  | \$268.00    |
| 20.   |          | culate your current mont                                      | hly income for the year. I      | -ollow these steps:     |  | \$268.00    |
|       | 20a      | a. Copy line 19b.   |                                 |                         |  |             |
|       |          | Multiply by 12 (the numb                                      | er of months in a year).        |                         |  | x 12        |
|       | 20b      | o. The result is your current                                 | monthly income for the yea      | ar for this part of the | form.  | \$3,216.00  |
|       | 200      | c. Copy the median family in                                  | come for your state and si      | ze of household fror    | n line 16c.  | \$67,254.00 |
| 21.   | Hov      | w do the lines compare?                                       |                                 |                         |  |             |
|       | <b>✓</b> | Line 20b is less than line 2 commitment period is 3 years     |                                 | ed by the court, on     | the top of page 1 of this form, check box 3, The   |             |
|       |          | Line 20b is more than or e                                    |                                 | nerwise ordered by the  | he court, on the top of page 1 of this form, check box   |             |
| Part  | 4:       | Sign Below  |                                 |                         |  |             |
|       |          | By signing here, I declare u                                  | under penalty of perjury tha    | t the information on    | this statement and in any attachments is true and correct.   |             |
|       |          |   | -1 01 6                         | _                       | 0 0 0 7 //   | ^           |
|       |          | /s/ Sheryl Franklin Signature of Debtor 1                     | Shuffall                        | _                       | Signature of Debtor 2  |             |
|       |          | Date 2/13/2018<br>MM/DD/YYYY                                  |                                 |                         | Date 2/13/2018<br>MM/DD/YYYY   |             |
|       |          | If you checked 17a, do NC If you checked 17b, fill out above. |                                 |                         | e 39 of that form, copy your current monthly income from line  | ∍14         |